



The Corporation

OF

The City of Capetown



ANNUAL REPORT

OF THE

Medical Officer of Health,

T. SHADICK HIGGINS,
M.D., B.S., B.Sc., Lond.; M.R.C.S., Eng., L.R.C.P., Lond.; D.P.H., Cantab.;
Fellow of the Royal Sanitary Institute,

For the year ended 30th June, 1923.

THE CORPORATION OF THE CITY OF CAPE TOWN.

Public Health Department,
12 Keerom Street,,
Cape Town.

WITH THE MEDICAL OFFICER OF HEALTH'S CONSENTS.

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THE CORPORATION OF THE CITY OF CAPETOWN

APPENDIX No. 8.

Annual Report of the Medical Officer of Health,

T. SHADICK HIGGINS,

M.D., B.S., B.Sc., Lond.; M.R.C.S., Eng., L.R.C.P., Lond.; D.P.H., Cantab.;
Fellow of the Royal Sanitary Institute,

FOR THE YEAR ENDED 30TH JUNE, 1923.

TO HIS WORSHIP THE MAYOR

AND COUNCILLORS OF THE CITY OF CAPETOWN.

MR. MAYOR, MADAM AND GENTLEMEN,—

I have the honour to present the Annual Report on the health and sanitary condition of the City of Capetown for the year ended 30th June, 1923, together with an account of the work of the Health Department during the year.

Your former Medical Officer of Health (Dr. A. Jasper Anderson), who had been ailing for some months previously, was granted three months leave of absence as from 1st January, 1923, and ceased to hold office on 31st March, 1923. Dr. Anderson, who was the first whole-time Medical Officer of Health for the City, was appointed on 14th September, 1901, and had therefore held this important office for over 21 years. His work during that period both in the old City of Capetown and in the extended Municipality is recorded in the series of Annual Reports which he published, and its importance is too well recognised to make any detailed reference to it on my part necessary, even if it could be adequately dealt with in a brief note of this nature.

Dr. A. W. Reid, the Assistant Medical Officer of Health, was in charge of the work in Dr. Anderson's absence on leave from December 15th, 1922, and on January 1st, 1923, he was appointed as Acting Medical Officer of Health, which position he continued to occupy until 18th June when I took up my duties. Dr. W. P. Cooney was appointed as Acting Medical Superintendent of Hospitals on January 1st, 1923, and his appointment has been made permanent since the end of the year under report.

I am personally not responsible for the period dealt with in this report, as I arrived in Capetown only a few days before the end of the year. The subject-matter of the report has been prepared in the Department on the same lines as in previous years, and largely under Dr. Reid's direction, and I have only to present it.

I take this opportunity of expressing my sense of the honour which you have done me in appointing me to the office of Medical Officer of Health to your City, and to assure you of my whole-hearted service.

I am,

Mr. Mayor, Madam and Gentlemen.

Your obedient servant.

T. SHADICK HIGGINS.

Medical Officer of Health.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH
FOR THE YEAR ENDED 30TH JUNE, 1923.

POPULATION.

The estimated population made on the supposition that the rate of increase will be the same from 1921 onwards as from 1911 to 1921, is as under, and it is on these estimated populations that the various rates are calculated for the year 1922-1923.

Calculated population for the 31st December, 1922. (Middle of the year).

Race.						Males.	Females.	Persons.
European	..	..	..	..	..	52,986	54,444	107,430
Non-European	..	..	..	..	..	40,834	42,756	83,590
All Classes	..	..	..	..	..	93,820	97,200	191,020

(For calculated populations, Birth-rates, Death-rates, Zymotic rates and Infant Mortality, from the date of Unification, see Table D. in the Appendix).

BIRTHS.

For the period under review there were 6,702 births, 2,397 being Europeans and 4,305 non-Europeans, as compared with 6,807 (2,522 Europeans, 4,283 non-Europeans and 2 of race unknown) in the previous year, and 6,312 (2,528 Europeans, 3,782 non-Europeans and 2 of race unknown) in 1920-1921.

(The above figures are exclusive of any births which took place during the period under review but were not registered up to September 7th, 1923).

The births are classified as occurrences and are arranged in Table 1 for the separate months of the year under report and for the previous year. For every hundred female births there were 101·4 male births amongst the Europeans, and 107·8 amongst the non-Europeans, as compared with the previous two years, when the corresponding figures were 107·6 and 104·2 (1922) and 109·3 and 107·6 (1921) respectively.

TABLE I.

BIRTHS FROM JULY 1ST, 1922, TO JUNE 30TH, 1923, IN THE CITY OF CAPE TOWN, 1923, CLASSIFIED AS TO RACE, SEX, LEGITIMACY AND MONTH OF BIRTH
AS REGISTERED UP TO 7TH SEPTEMBER, 1923, INCLUSIVE.

Month.	EUROPEAN.										OTHER THAN EUROPEAN.												
	1922-1923.					1921-1922.†					1922-1923.					1921-1922.†							
	Legit.		Illegit.	Total.	Total.	Legit.		Illegit.	Total.	Total.	Legit.		Illegit.	Total.	Total.	Legit.		Illegit.	Total.	Total.			
	M.	F.	M.	F.	Per-sons.	M.	F.	M.	F.	Per-sons.	M.	F.	M.	F.	Per-sons.	M.	F.	M.	F.	Per-sons.			
July ..	107	84	12	6	119	100	219				155	141	48	53	203	194	124	144	47	47	171	191	362
August ..	89	116	8	3	97	119	216				143	155	56	50	199	205	115	134	49	49	164	183	347
September	97	104	11	11	108	115	223				153	141	65	62	218	203	168	138	53	52	221	190	411
October ..	111	100	9	9	120	109	229				151	131	57	57	208	188	147	120	56	44	203	164	367
November	90	85	9	6	99	91	190				141	128	39	48	180	176	113	126	40	45	153	171	324
December	96	102	8	7	104	109	213				161	134	49	43	210	177	146	132	55	55	201	187	388
			1	9	2	2		1	9	2	2								1	9	2	2	
January	95	93	9	8	104	101	205				117	114	57	46	174	160	132	110	44	34	176	144	320
February	84	91	7	8	91	99	190				109	117	42	40	151	157	119	117	44	38	163	155	318
March ..	86	65	6	3	92	68	160				127	97	40	33	167	130	148	138	41	44	189	182	371
April ..	77	87	5	6	82	93	175				120	123	39	40	159	163	157	119	54	45	181	164	345
May ..	96	91	5	6	101	97	198				147	113	42	31	189	144	121	146	46	47	167	193	360
June ..	85	81	5	5	90	89	179				139	135	35	40	175	175	137	124	60	49	197	173	370
Totals for Year ..	1,113	1,112	94	78	1,207	1,190	2,397				1,663	1,529	570	543	2,233	2,072	1,597	1,548	589	549	2,186	2,097	4,283

† This Table does not include the 2 male births of race unknown, belonging to December, 1921 and April, 1922, classified as illegitimate on account of the circumstances of the cases.

The birth-rates were 22·31 for Europeans, 51·50 for non-Europeans, and 35·08 for All Classes, as against the birth-rates in the previous two years of 24·36 for Europeans, 51·90 for non-Europeans and 36·59 for All Classes in 1922 and 25·34 for Europeans, 46·41 for non-Europeans and 34·83 for All Classes in 1921.

The natural increase of the population during the year, taking the number of births and deaths in the gross, was 1,199 for Europeans, and 1,865 for non-Europeans as compared with the natural increase during the previous year 1,292 for Europeans, and 2,017 for non-Europeans, and 1,163 for Europeans and 1,129 for non-Europeans in 1920-1921.

The percentages of illegitimate births of the total births were 7·2 for the European and 25·8 for the non-European populations as compared with 6·7 for the Europeans and 26·6 for the non-Europeans in the previous year, and 5·8 for Europeans and 25·4 for non-Europeans in 1920-1921.

In Table B in the appendix the return of births in the City of Capetown for the year covered by this report as registered up to and including 7th September, 1923, and classified as occurrences, is given for the separate Wards for the City. This Table also gives the number of Still-births for the City and separate Wards.

For the purpose of comparison I give the following birth-rates in other districts:—

TABLE II.
COMPARATIVE TABLE OF BIRTH-RATES FOR VARIOUS CENTRES.

District.	Period.	European.	All Non-European Races.	Asiatics.	Natives.	All Classes.
England and Wales ..	1922	..	..	..	..	20·6
County of London ..	1922	..	..	..	..	21·0
Durban	Year ended 30th June, 1923.	23·72	..	57·1	20·8	..
Pretoria	Year ended 30th June, 1923.	20·0†	..	..	..	..
Johannesburg ..	Year ended 30th June, 1923.	24·61	20·09 47·67*	14·76	15·13	..
Kimberley	Year ended 30th June, 1923.	25·13	..	..	..	..
Bloemfontein ..	Year ended 30th June, 1923.	24·6	39·6*	..	25·7	28·0
Pietermaritzburg ..	Year ended 30th June, 1923.	23·5†	..	..	..	..
East London	Year ended 30th June, 1923.	28·2	..	..	..	..
Capetown	Year ended 30th June, 1922.	26·5	49·0	..	..	36·0
Capetown	Year ended 30th June, 1922.	24·36	51·90	..	..	36·59
Capetown	Year ended 30th June, 1923.	22·31	51·50	..	..	35·08

Vide Table D in the Appendix.
* Eurafrians only. † Corrected for non-residents.

TABLE III.
COMPARATIVE TABLE OF PERCENTAGES OF ILLEGITIMATE BIRTHS OF TOTAL BIRTHS FOR VARIOUS CENTRES.

District.	Period.	European.	All Non-European Races.	Asiatics.	Natives.	All Classes.
Durban	Year ended 30th June, 1923.	3·37†	..	..	..	..
Pretoria	Year ended 30th June, 1923.	4·18	27·70 33·34*	3·45	32·54	..
Johannesburg ..	Year ended 30th June, 1923.	3·25	..	..	..	..
Kimberley	Year ended 30th June, 1923.	2·3	31·9*	..	54·3	25·4
Bloemfontein ..	Year ended 30th June, 1923.	2·51†	..	..	..	..
East London	Year ended 30th June, 1923.	1·7	57·0	..	..	32·0
Capetown	Year ended 30th June, 1922.	6·7	26·6	..	..	19·22
Capetown	Year ended 30th June, 1923.	7·2	25·8	..	..	20·67

Vide Table D in the Appendix.
* Eurafrians only. † Corrected for non-residents.

DEATHS.

The deaths for the year total 3,638, and of these 1,198 were Europeans (680 males and 518 female) and 2,440 were non-Europeans (1,286 males and 1,154 females) as compared with 3,498 (1,230 Europeans and 2,266 non-European and 2 of race unknown, in the previous year and 4,020 (1,365 Europeans and 2,653 non-Europeans and 2 of race unknown) in 1920-1921. The gross death-rates were 11·15 for Europeans, 29·19 for non-Europeans and 19·94 for All Classes as against 11·88 for Europeans, 27·46 for non-Europeans and 18·80 for All Classes in the previous year and 13·68 for Europeans, 32·56 for non-Europeans and 22·18 for All Classes in the year 1920-1921.

The annexed table (Table IV) gives the Return of Deaths in Public Institutions, from which it will be seen that of the total European deaths 40·90 per cent died in public institutions, and of the total non-European deaths 16·11 per cent. In the previous year the corresponding figures were 37·89 and 18·14.

TABLE IV.
RETURN OF DEATHS IN PUBLIC INSTITUTIONS.

Institutions.	Total Deaths.		Deaths not belonging to City.		Deaths belonging to City.	
	E.	O.	E.	O.	E.	O.
Old Somerset Hospital	49	48	15	24	34	24
New Somerset Hospital	128	110	33	31	95	79
City Hospital	44	80	5	14	39	66
Woodstock Cottage Hospital	41	20	4	3	37	17
Rondebosch and Mowbray Cottage Hospital	13	20	1	3	12	17
The Monastery Nursing Home	24	..	12	..	12	..
Monte Rosa Hospital	3	..	3	..	..	..
The Orchards Nursing Home	11	..	4	..	7	..
Deaconess Hospital	13	..	3	..	10	..
Tamboers Kloof, Nursing Home	17	..	10	..	7	..
Hof Street Nursing Home	16	..	8	..	8	..
Wheatfield Nursing Home	2	..	1	..	1	..
Beacon Nursing Home	6	..	2	..	4	..
Bloemhof Nursing Home	4	..	2	..	2	..
St. Monicas Home .. ..	..	4	..	1	..	3
Rhodes Nursing Home	2	..	..	..	2	..
*Waverley Maternity Home	3	..	..	..	3	..
Peninsula Maternity Home	6	9	1	..	5	9
Sea Point Maternity Home	2	..	..	..	2	..
Booth Memorial Home	14	..	5	..	9	..
Nurse Moller's Maternity Home	3	..	..	..	3	..
Vrede Oord Maternity Home .. ..	..	2	..	1	..	1
Magdalena Huis	3	..	3	..	..	..
Cape Jewish Aged Home	4	..	2	..	2	..
Ladies' Christian Home	2	..	1	..	1	..
Nazareth House	6	..	..	..	6	..
All Saints' Home	1	..	..	..	1	..
Lady Buxton Home	1	..	..	..	1	..
Tokai Convict Station .. ..	..	1	..	..	..	1
Valkenberg Mental Hospital—						
Mowbray Section	51	..	25	..	26	..
Maitland Section	4	67	4	49	..	18
Alexandra Hospital	4	..	2	..	2	..
Capetown Gaol	3	8	2	3	1	5
House of Correction .. ..	..	6	..	2	..	4
Lock Hospital .. ..	..	2	..	..	..	2
Victoria Cottage Hospital, Wynberg ..	9	13	..	..	9	13
No. 1 Military Hospital, Wynberg ..	..	1	..	..	..	1
Plumstead Sanatorium	1	..	..	..	1	..
Simonstown Cottage Hospital .. ..	..	2	..	..	..	2
Totals	490	393	148	131	342	262

* The Waverley Maternity Home was transferred from Ward 4 to Ward 1 on the 1st February, 1923.

There were 98 persons who died in public institutions and nursing homes who came from beyond the boundaries of the City for treatment, and who had been in the institution long enough for their deaths to be considered as belonging to the City, and these were allocated to the Wards of the City in which the institutions to which they were admitted are situated.

The following figures show the number of these cases for each Institution and the Ward to which they were allocated:—

Deaths.		Institutions.	Wards.
E.	O.		
6	16	Old Somerset Hospital	2
..	2	New Somerset Hospital	2
1	..	City Hospital	2
2	..	Cape Jewish Aged Home	5
1	..	Ladies' Christian Home	5
		Valkenberg Mental Hospital—	
21	..	Mowbray Section	10
4	43	Maitland Section	11
1	..	Alexandra Hospital	11
..	1	House of Correction.. .. .	6
36	62	Totals.	—

There were also 29 deaths in institutions which were allocated to the Wards of the City in which the institutions are situated, as the cases were admitted to the institutions from unascertained addresses in the City. They were mostly of the vagrant classes. The following is the enumeration of the same:—

Deaths.		Institutions.	Wards.
E.	O.		
1	5	Old Somerset Hospital	2
3	4	New Somerset Hospital	2
..	1	City Hospital	2
1	..	Ladies' Christian Home	5
3	1	Nazareth House	6
1	..	Lady Buxton Home	6
		Valkenberg Mental Hospital—	
4	..	Mowbray Section	10
..	2	Maitland Section	11
..	1	Capetown Gaol	6
..	2	House of Correction	6
13	16	Totals.	—

In order to ascertain a death-rate corrected for visitors, those persons dying within the City whose homes are outside are excluded, leaving the deaths for the City for all diseases, after deducting these deaths, 594 males and 459 females of the European population and 1,215 males and 1,108 females of the non-European population.

For the City the death-rates for all diseases, corrected for visitors, are 9.80 for Europeans, 27.79 for non-Europeans and 17.67 for all Classes, as compared with the corresponding figures for the previous year of 10.63 for Europeans, 26.18 for non-Europeans and 17.54 for All Classes. The corresponding figures for the year 1920-1921 were 12.03 for Europeans, 30.64 for non-Europeans, and 20.41 for All Classes.

The accompanying figures will allow of some comparison being made of the death-rates in the City of Capetown, with those of England and Wales, London, and the other large towns in South Africa. But in drawing conclusions from a comparison of the death-rate of one town and another it is necessary to take into account the difference in the age and sex distribution of the populations. In England and Wales it is customary to correct the differences to the basis of the age and sex distribution of the population of England and Wales as a whole. I have done this in regard to the European death-rate for the year under review.

For 1901-10 the mean death-rate for England and Wales was 15·19. I have applied the death-rates for the different age and sex groups in England and Wales for those years to the corresponding groups in Capetown (on the basis of the 1921 census) and find that this would give a death-rate (European) for Capetown of 14·004. The factor of correction to reduce the Capetown death-rate to the England and Wales basis is, therefore, $15\cdot19 \div 14\cdot004$, or 1·08469. I am unable to produce the factor of correction for the non-European population as the Director of Census is unable to give me the number of non-Europeans living in the various age-groups.

TABLE V.
COMPARATIVE TABLE OF DEATH RATES FOR VARIOUS CENTRES.

Place.	Period.	European Crude Death- rate.	European Death-rate Corrected for Non- Residents only.	European Death-rate Corrected for Non- residents and age and sex distribution.	Crude. Death- rate for all Non- European Races:	Asiatic Crude Death- rate.	Native Crude Death- rate.	Crude Death- rate for all Classes.
England and Wales ..	1922	..	..	..	..	..	..	12·9
City of London ..	1922	..	..	..	..	..	..	13·4
Capetown	Year ended 30th June, 1923.	..	8·20	..	..	18·4†	3·97†	..
Port Elizabeth	Year ended 30th June, 1923.	..	8·55	..	14·78† 21·37†	21·49†	13·59†	..
Durban	Year ended 30th June, 1923.	11·30	10·06	..	33·71†	19·16	20·29	15·80
Stellenbosch	Year ended 30th June, 1923.	12·4	10·8	..	23·5* 22·9†	..	36·3 34·8†	23·4
Worcester	Year ended 30th June, 1923.	12·1	7·0	..	..	..	..	..
Kimberley	Year ended 30th June, 1923.	11·3	9·4	..	..	..	..	..
London	Year ended 30th June, 1923.	12·8	11·4	..	35·7 34·0†	..	..	22·6
Capetown	Year ended 30th June, 1922.	11·88	10·63	11·53	27·46	..	..	18·80
Capetown	Year ended 30th June, 1923.	11·15	9·80	10·63	29·19	..	..	19·94

The Factor of Correction for the City of Capetown is 1·08469.
Europeans only, crude death-rate. † Corrected for non-residents.
Europeans only and corrected for non-residents. *Vide* Table D. in the Appendix.

SEX.

There were 680 deaths amongst European males and 518 amongst European females. Of these, 80 deaths of males and 59 deaths of females did not belong to the Municipality, and after deducting these, the corrected death-rates were, per 1,000 European males 11·21 and per 1,000 European females 8·43. With regard to the deaths of the non-European population there were 1,286 males and 1,154 females, and of these, 71 males and 46 females did not belong to the Municipality, and on subtracting these, corrected death-rates of 29·75 per 1,000 males and 25·91 per 1,000 females were arrived at.

SEASONAL PREVALENCE.

In Table VI the deaths are arranged as to the month in which they occur, divided into male and female deaths, and compared with similar figures for the previous year.

The European deaths were greatest in July (140) and April and June (109 each) and January (106). With regard to the non-European population the deaths were largest in June (233), December (223), July (220) and January (219).

For the Europeans the increased deaths in July were caused by premature births and pneumonia; in April, June and January by a general increase of deaths, no particular cause being prominent.

Regarding the non-Europeans, the increase in June was due to whooping cough, bronchitis and pneumonia; in December to diarrhœa, diseases of the stomach and enteritis; in July to pneumonia; and in January to diseases of the stomach.

TABLE VI.

SHOWING DEATHS CLASSIFIED INTO SEX, RACE, AND MONTH OF DEATH.

Month.	1922-1923.						1921-1922.†					
	European.			Non-European.			European.			Non-European.		
	M.	F.	Totls.	M.	F.	Totals.	M.	F.	Totls.	M.	F.	Totls.
July ..	81	59	140	116	104	220	55	53	108	98	87	185
August ..	58	38	96	105	94	199	49	52	101	111	101	212
September ..	52	40	92	93	79	172	57	49	106	104	81	185
October ..	53	50	103	91	91	182	54	45	99	95	79	174
November ..	48	32	80	122	89	211	47	51	98	88	80	168
December ..	60	44	104	116	107	223	55	46	101	98	107	205
January ..	57	49	106	116	103	219	52	39	91	110	87	197
February ..	42	25	67	91	100	191	66	45	111	73	71	144
March ..	54	35	89	85	91	176	67	34	101	107	99	206
April ..	58	51	109	118	90	208	58	38	96	87	96	183
May ..	51	52	103	109	97	206	47	55	102	103	78	181
June ..	66	43	109	124	109	233	65	51	116	122	104	226
Year ..	680	518	1,198	1,286	1,154	2,440	672	558	1,230	1,196	1,070	2,266

† This table does not include the 2 male deaths of unknown race, newly born, belonging to December, 1921 and April, 1922.

The chart facing this page gives the number of deaths of both Europeans and other than Europeans from tuberculosis, the seven zymotic diseases and the remaining deaths, for each week of the year. An oblong represents one death—if black, from tuberculosis; if stippled, from a zymotic disease; and if shaded, from another cause.

The weekly rainfall is given at the bottom of the chart for comparison.

DEATHS AT VARIOUS AGES.

Of the 1,198 deaths amongst Europeans:—

196	occurred under 1 year of age—i.e., a percentage of European deaths of ..	16.36
69	„ between 1 and 5 years ..	5.76
96	„ between 5 and 25 years ..	8.01
530	„ between 25 and 65 years ..	44.24
307	„ over 65 years ..	25.63

Of the 2,440 deaths amongst Non-Europeans;—

861	occurred under 1 year of age—i.e., a percentage of Non-European deaths of ..	35.29
440	„ between 1 and 5 years ..	18.03
288	„ between 5 and 25 years ..	11.80
683	„ between 25 and 65 years ..	27.99
168	„ over 65 years ..	6.89

INFANT MORTALITY.

The infant mortality is measured by calculating the number of children under one year of age who died out of 1,000 births during the period under con-

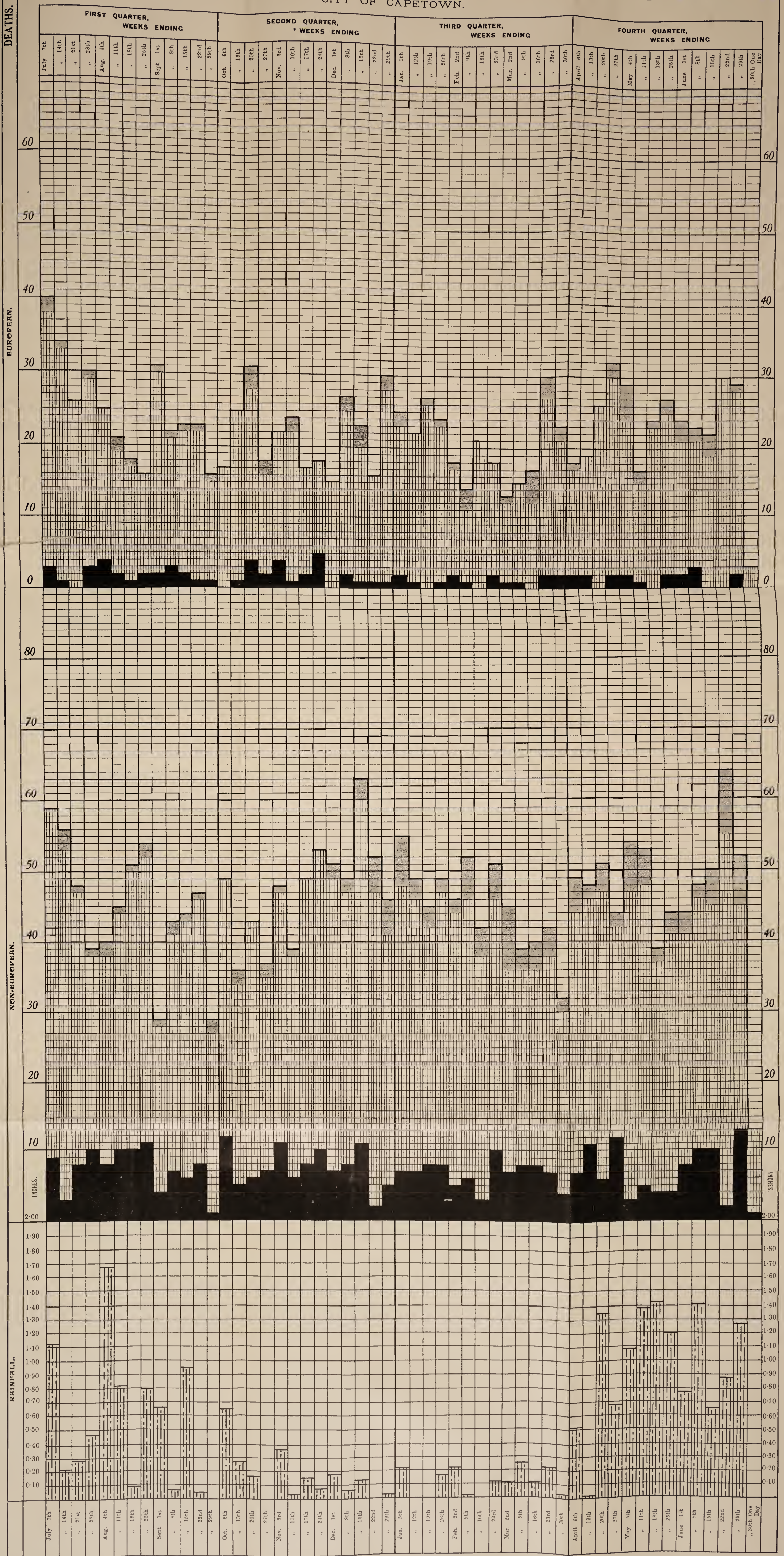
Chart of Deaths from Tuberculosis, Zymotic Diseases, and other causes, with Rainfall, During the Year 1st July 1922, to 30th June, 1923.

Deaths from Tuberculosis Indicated as

Deaths from Zymotic Diseases Indicated as

Deaths from other causes Indicated as

CITY OF CAPETOWN.



* Body of a newly-born coloured female found dead at Clifton-on-Sea; exact date of death not given. Occurred sometime in November 1922. This death is therefore not included in the above table. The death is classified as "Causes of Death not specified or ill-defined."

sideration, and to some extent this rate is a rough index of the sanitary condition of a district, and is the most reliable rate in this report.

During the year there were 196 deaths of Europeans and 861 of non-Europeans, making a total of 1,057 deaths under 1 year of age, being 130 deaths more than in the previous year, and 112 deaths less than those for 1921.

The births during the period under review were 2,397 Europeans and 4,305 non-Europeans, giving a total of 6,702 for All Classes as registered up to and including 7th September, 1923.

The infant mortality for Europeans was 81·77. For the two preceeding years it was 68·60 in 1922 and 106·01 in 1921.

With regard to the non-Europeans the infant mortality was 200·00 compared with 175·58 in 1922, and 237·70 in 1921.

The infant mortality for All Classes for the present year was 157·71 as against 136·18 for 1922, and 185·20 for 1921.

The accompanying table (Table VII) gives the deaths amongst infants for each month of the year, divided into race and sex, together with the corresponding figures for the previous year.

For Europeans the increased deaths in July were caused by premature births and pneumonia; in January by diseases of the stomach; and in May by debility.

The causes of the increased non-European deaths in December were: Diarrhœa, diseases of the stomach and enteritis; in January they were diarrhœa and diseases of the stomach; and in November they were convulsions and pneumonia.

TABLE VII.

DEATHS OF CHILDREN UNDER 1 YEAR CLASSIFIED INTO SEX, RACE, AND MONTH OF DEATH.

Month.	1922-1923.						1921-1922.†					
	European.			Non-European.			European.			Non-European.		
	M.	F.	Totals	M.	F.	Totals	M.	F.	Totals	M.	F.	Totals
July ..	13	12	25	27	28	55	4	11	15	31	29	60
August ..	7	8	15	32	31	63	6	6	12	39	34	73
September ..	6	4	10	30	32	62	8	6	14	45	31	76
October ..	8	7	15	33	33	66	7	—	7	33	19	52
November ..	2	7	9	46	36	82	5	6	11	29	26	55
December ..	9	9	23	54	47	101	6	7	13	43	30	73
January ..	11	13	24	43	40	83	8	7	15	36	23	59
February ..	8	2	40	35	33	68	15	8	23	29	24	53
March ..	9	6	15	30	28	58	11	8	19	37	33	70
April ..	8	9	17	50	26	76	9	8	17	28	28	56
May ..	10	13	23	44	33	77	9	8	17	30	19	49
June ..	8	7	15	33	37	70	5	5	10	45	31	76
Year ..	99	97	196	457	404	861	93	80	173	425	327	752

† This table does not include the 2 male deaths of unknown race, newly-born, belonging to December, 1921 and April, 1922.

The Infant Mortality varies greatly in the different quarters, and the figures for the different quarters in the year under review, together with the three previous years, are as follows:—

Quarters.	1922-1923.		1921-1922.		1920-1921.		1919-1920.	
	European.	Non-European	European.	Non-European.	Euro-pean.	Non-European.	European.	Non-European.
July, August and Sept.	75·99	147·30	66·67	186·61	77·16	227·57	81·30	188·01
Oct., Nov. and Dec.	66·46	218·61	49·76	166·82	126·11	257·96	72·89	143·44
Jan., Feb. and March	88·29	222·58	88·92	180·38	110·34	265·77	93·51	202·51
April, May and June	99·64	221·89	68·43	168·37	110·93	201·77	78·52	208·26

It is interesting to compare the Infant Mortality of the separate Wards into which the City is divided, and for that purpose I have prepared the following Table.

An inspection of this Table shows that the Infant Mortality for Europeans varies thus:—

44·78 in Ward 5 (Park).	76·92 in Ward 10 (Mowbray).
47·62 in Ward 4 (Kloof).	78·65 in Ward 13 (Claremont).
50·85 in Ward 1 (Sea Point).	94·12 in Ward 14 (Kalk Bay).
61·54 in Ward 12 (Rondebosch).	101·93 in Ward 8 (Woodstock).
63·38 in Ward 6 (East Central).	105·60 in Ward 9 (Salt River).
63·83 in Ward 2 (Harbour).	110·24 in Ward 7 (Castle).
68·96 in Ward 11 (Maitland).	138·89 in Ward 3 (West Central).

The range of the Non-European population was ;—

47·62 in Ward 1 (Sea Point).	194·97 in Ward 14 (Kalk Bay).
109·59 in Ward 5 (Park).	206·28 in Ward 3 (West Central).
132·87 in Ward 4 (Kloof).	222·22 in Ward 2 (Harbour).
171·10 in Ward 8 (Woodstock).	226·09 in Ward 11 (Maitland).
177·21 in Ward 13 (Claremont).	229·63 in Ward 10 (Mowbray).
187·80 in Ward 7 (Castle).	234·41 in Ward 12 (Rondebosch).
192·05 in Ward 6 (East Central).	253·56 in Ward 9 (Salt River).

TABLE VIII.

DEATHS OF CHILDREN UNDER 1 YEAR CLASSIFIED IN WARDS AND FOR THE CITY OF CAPETOWN, TOGETHER WITH THE RESPECTIVE INFANT MORTALITY.

Item.	WARDS.															City.
	1 Sea Point.	2 Harbour.	3 West Central.	4 Kloof.	5 Park.	6 East Central.	7 Castle.	8 Wood- stock.	9 Salt River.	10 Mow- bray.	11 Mait- land.	12 Ronde- bosch.	13 Clare- mont.	14 Kalk Bay.	Out of City.	
European Deaths ..	9	6	5	6	6	9	14	37	34	14	10	8	14	8	16	196
Non-European Deaths..	2	28	46	38	8	145	117	45	89	31	78	109	70	31	24	861
<i>Infant Mortality.</i>																
European ..	50.85	63.83	138.89	47.62	44.78	63.38	110.24	101.93	105.60	76.92	68.96	61.54	78.65	94.12	..	81.77
Non-European ..	47.62	222.22	206.28	132.87	109.59	192.05	187.80	171.10	253.56	229.63	226.09	234.41	177.21	194.97	..	200.00
All Classes ..	50.23	154.54	196.91	106.80	67.63	171.68	174.67	131.00	182.76	141.95	179.59	196.64	146.60	159.84	..	157.71

In the first column of Table A in the Appendix, the causes of death of children under 12 months of age are given both for Europeans and non-Europeans; but in Table IX these deaths are classified as to age at death and cause of death.

From this Table it can be calculated that amongst the Europeans 25.51 per cent. of deaths occurred in the first week and 36.73 in the first month of life of the total European deaths under 1 year. For the population termed non-European, the percentages of the deaths were 13.59 for the deaths under 1 week, and 24.62 for those under one month of the total deaths under one year.

AGES AT AND CAUSES OF DEATH OF CHILDREN UNDER 1 YEAR—continued.

DISEASE.	RACE.	Under 1 day.	Under 2 days.	Under 3 days.	Under 4 days.	Under 5 days.	Under 6 days.	Under 7 days.	Under 1 week.	Under 2 weeks.	Under 3 weeks.	Under 4 weeks.	Under 1 month.	Under 2 months.	Under 3 months.	Under 4 months.	Under 5 months.	Under 6 months.	Under 7 months.	Under 8 months.	Under 9 months.	Under 10 months.	Under 11 months.	Under 12 months.	TOTAL UNDER 1 YEAR.
Diseases of Lymphatics and of Spleen...	E	23	11	5	6	2	2	1	50	9	11	2	72	19	18	15	16	14	6	8	7	8	8	5	196
Nephritis ...	O	35	32	18	13	2	6	11	117	46	34	15	212	65	68	68	64	65	61	55	66	49	38	50	861
Bright's Disease, Albuminuria ...	E																	1							
Other Diseases of Urinary System ...	O									1			1												
Fractures and Contusions ...	E																								
Burn, Scald ...	O																								
Other Deaths of Accident or Negligence ...	E	1							1				1	1								1			2
Murder ...	O								1				1												1
Asphyxia of Infant ...	E	1							1				1												1
Umbilical Hæmorrhage	O																								
Death due to Prolonged Labour ...	E		1	2	1				4	2	1		7												7
Other Accidental Death to Child through Parturition	O	1			1				1				1												1
Debility ...	E	2						1	3				3	4	5	1	5	2	1		1				3
Causes not Specified or ill-defined ...	O	3	5	2	3				14	3	1	3	21	6	4	5	5	1				1			1
TOTALS ...	E	23	11	5	6	2	2	1	50	9	11	2	72	19	18	15	16	14	6	8	7	8	8	5	196
	O	35	32	18	13	2	6	11	117	46	34	15	212	65	68	68	64	65	61	55	66	49	38	50	861

The deaths from the principal causes have been classified as shown in the annexed Table (Table X), and the rates on 100,000 births calculated both for Europeans and non-Europeans for the City of Capetown for the year under consideration and for the previous year.

TABLE X.

INFANT MORTALITY FOR CERTAIN DISEASES, CALCULATED ON 100,000 BIRTHS.

Diseases Certified as Cause of Death.	EUROPEAN.		Non-EUROPEAN.	
	City of Cape-town, 1st July, 1922, to 30th June, 1923.	City of Cape-town, 1st July, 1921, to 30th June, 1922.	City of Cape-town, 1st July, 1922, to 30th June, 1923.	City of Cape-town, 1st July, 1921, to 30th June, 1922.
Zymotic diseases (Measles, Diphtheria, Scarlet Fever, Enteric Fever and Whooping Cough) ..	208·6	...	441·3	116·7
Tuberculosis	41·7	85·2	325·2	93·4
Diarrhœa, want of Breast-milk and diseases of Digestive Organs ..	2294·5	1732·0	5760·7	4529·5
Premature births, Atelectasis and congenital malformations ..	1960·8	1277·7	2439·0	2638·3
Convulsions and Meningitis ..	667·5	340·7	1695·7	1657·7
Diseases of Respiratory Organs ..	1501·9	766·6	6736·3	5323·4
Debility	876·1	312·3	1138·2	1400·9

As will be seen from the foregoing Table, there have been increases for both races in the rates for the present as compared with the previous year, with the exception of those for tuberculosis for Europeans, and premature births, atelectasis and congenital malformations, and debility for the non-Europeans, whilst the non-European rates for the present and previous years for convulsions and meningitis are practically identical.

TABLE XI.

COMPARATIVE TABLE OF INFANT MORTALITY FOR VARIOUS CENTRES.

CALCULATED ON PER 1,000 BIRTHS.

District.	Period.	European.	All Non-European Races.	Asiatics.	Natives.	All classes.
England and Wales ..	1922	..	..	..	..	77·00
County of London ..	1922	..	..	..	..	74·00
Durban	Year ended 30th June, 1923.	58·34	..	..	..	..
Pretoria	Year ended 30th June, 1923.	81·26	14·78 21·37*	21·49	13·59	..
Johannesburg	Year ended 30th June, 1923.	88·26	215·83*	198·11	571·12	178·5
Kimberley	Year ended 30th June, 1923.	122·2	240·8*	..	451·1	266·7
Bloemfontein	Year ended 30th June, 1923.	65·7	..	..	..	..
Pietermaritzburg ..	Year ended 30th June, 1923.	51·6	..	..	..	..
East London	Year ended 30th June, 1923.	107·00	300·00	..	..	219·00
Capetown	Year ended 30th June, 1922.	68·60	175·58	..	..	136·18
Capetown	Year ended 30th June, 1923.	81·77	200·00	..	..	157·71
<i>Vide</i> Table D in the Appendix.						
* Eurafrians only.						

Old Age.—There were 25 persons who died at 90 years of age and over, as against 89 in the previous year. Two were European males, 7 European females, 8 non-European males and 8 non-European females. Of the 2 European males.

1 died at 94 years and the other at 92 years; of the 7 European females, 1 died at 96, 1 at 93, 1 at 92, 1 at 91 and 3 at 90; of the 8 non-European males, 1 died at 102, 1 at 98, 1 at 97, 1 at 94, 1 at 93, 1 at 91, 1 at 90, and one whose exact age was not known, but who was described as "very old." Of the 8 non-European females, 1 died at 102, 1 at 98, 2 at 96, 1 at 94, 1 at 91 and 2 at 90. In most of the cases they had either been born in the City of Capetown, or in its neighbourhood, or had lived there many year.

CAUSES OF DEATHS.

In Table A in the appendix will be found a full classification of deaths, giving the causes, ages, race and wards of the City, and from the summary thereof it is seen that the total deaths are classified into 9 classes and the percentages of the deaths in each class of the total deaths amongst the European and non-European populations respectively are given below:—

Class	I.	Zymotic Diseases	..	..	177 E.	Deaths, or 14.78% of E.	Deaths
		"	"	"	585 Non-E.	" " 23.98% "	Non-E. "
	II.	Parasitic Diseases	..	..	1 E.	0.08% "	E. "
		"	"	"	2 Non-E.	0.08% "	Non-E. "
	III.	Dietetic Diseases	..	..	7 E.	0.59% "	E. "
		"	"	"	2 Non-E.	0.08% "	Non-E. "
	IV.	Constitutional Diseases	..	..	144 E.	12.02% "	E. "
		"	"	"	69 Non-E.	2.83% "	Non-E. "
	V.	Developmental Diseases	..	..	87 E.	7.26% "	E. "
		"	"	"	151 Non-E.	6.19% "	Non-E. "
	VI.	Local Diseases..	..	..	696 E.	58.10% "	E. "
		"	"	"	1,502 Non-E.	61.56% "	Non-E. "
	VII.	Deaths from Violence	..	..	58 E.	4.84% "	E. "
		"	"	"	54 Non-E.	2.21% "	Non-E. "
	VIII.	Accident to Child through Parturition	..	..	4 E.	0.33% "	E. "
		"	"	"	12 Non-E.	0.49% "	Non-E. "
	IX.	Unspecified & ill-defined causes	..	..	24 E.	2.00% "	E. "
		"	"	"	63 Non-E.	2.58% "	Non-E. "

Zymotic Diseases.—The deaths from the principal Zymotic diseases in the City of Capetown for the year under review, and (for comparison) for the period: 1st July, 1921, to 30th June, 1922, were as follows:—

ZYMOTIC DISEASES.

Zymotic Diseases.	Race.	City of Capetown, 12 months 1922-1923.	City of Capetown, 12 months 1921-1922.
Small Pox	{ E. Non-E.	Nil. Nil.	Nil. Nil.
Measles	{ E. Non-E.	3 21	Nil. Nil.
Scarlet Fever	{ E. Non-E.	Nil. Nil.	Nil. Nil.
Whooping Cough	{ E. Non-E.	9 29	Nil. 5
Diphtheria and Croup	{ E. Non-E.	13 7	9 6
Enteric and Continued Fever	{ E. Non-E.	25 30	27 46
Diarrhœa and Dysentery	{ E. Non-E.	17 64	6 73
Totals	{ E. Non-E.	67 151	42 130

The death-rate for the 7 principal Zymotic diseases are:—Europeans, 0.62; non-European, 1.81; and All Classes, 1.14.

The number of deaths from Zymotic diseases amongst Europeans belonging to Capetown was 58, non-Europeans 140 and All Classes 198. Of the European deaths from Zymotic diseases there was one from whooping cough, 2 from diphtheria, 3 from enteric fever, one from diarrhœa and 2 from dysentery, which did not belong to the City. For the non-European population there were 4 deaths from whooping cough, 2 from diphtheria, 3 from enteric fever, 1 from diarrhœa and 1 from dysentery not belonging to the City. The corrected zymotic death-rates are, therefore, 0·54 for Europeans, 0·67 for non-Europeans and 1·04 for All Classes. For the previous year the gross zymotic death-rates were 0·40 for Europeans, 1·57 for non-Europeans and 0·92 for All Classes, and the corrected zymotic death-rates, 0·33 for Europeans, 1·51 for non-Europeans and 0·85 for All Classes. For 1920-1921, the corresponding figures were: Gross rates, 0·98, 3·69 and 2·20, and corrected rates, 0·86, 3·52 and 2·06.

Measles.—There were 24 deaths (3 European and 21 non-European) from this disease, which is not notifiable, as compared with no deaths in the previous year, and 29 (2 European and 27 non-Europeans) in 1920-1921.

Whooping Cough.—The death-rates for this disease (also not notifiable) for the present year were 0·08 for Europeans, 0·35 for the non-Europeans, and 0·20 for All Classes as against nil for Europeans, 0·06 for non-Europeans, and 0·03 for All Classes in the previous year, and 0·16 for Europeans, 0·50 for non-Europeans and 0·31 for All Classes in 1920-1921.

Diarrhœa and Dysentery.—The deaths from these causes were 81 (17 Europeans and 64 non-Europeans) as compared with 79 (6 Europeans and 73 non-Europeans) for the previous year and 209 (30 Europeans and 179 non-Europeans) for 1920-1921.

The cases of notifiable diseases will be dealt with under "Notifications of Infectious Diseases" in Part 11.

OTHER DISEASES.

Cancer.—Amongst constitutional diseases, cancer accounts for the deaths of 77 males and 42 females amongst the Europeans and 18 males and 32 females amongst the non-European population, and of these 17 European males, 8 European females, 4 non-European males and 3 non-European females had been brought into the City for treatment, so that the corrected death-rates per million were 875 Europeans and 514 for non-Europeans, as against 879 for Europeans and 521 for non-Europeans in the previous year and 1,087 for Europeans and 478 for non-Europeans in 1920-1921.

Venereal Diseases.—There were 5 deaths of Europeans and 30 of non-Europeans registered during the year as compared with 5 Europeans and 47 non-Europeans in the previous year, and 4 Europeans and 59 non-Europeans in 1920-1921. All these deaths for the present and previous years and for 1920-1921 were chiefly caused by congenital syphilis. (See treatment of Venereal Disease in Part IV).

Nervous System.—The deaths ascribed to the diseases of this system were 152 Europeans and 199 non-Europeans, as compared with 137 Europeans and 218 non-Europeans in the previous year, and 138 Europeans and 209 non-Europeans in 1920-1921.

Circulatory System.—There were 207 European deaths and 166 non-European deaths from diseases of this system, as against 214 European and 170 non-European deaths in the previous year, and 233 European and 155 non-European deaths in 1920-1921.

Respiratory System.—The deaths certified as due to diseases of the respiratory system number 155 Europeans and 680 non-Europeans, giving death-rates of 1·44 for Europeans and 8·15 for non-Europeans per 1,000 of each class, as compared with the corresponding figures for the previous year of 1·64 for Europeans and 7·49 for non-Europeans and 1·54 for Europeans and 8·37 for non-Europeans in 1920-1921.

Digestive System.—There were 464 deaths certified as due to diseases of the digestive system (115 Europeans and 349 non-Europeans) as compared with 415 deaths (142 Europeans and 273 non-Europeans) in the previous year, and 512 deaths (163 Europeans and 349 non-Europeans) in 1920-1921.

Violence.—The deaths from these causes amounted to 112 and of these 58 were Europeans and 54 non-Europeans, as compared with 125 deaths (71 Europeans and 54 non-Europeans) in the previous year, and 132 deaths (62 Europeans and 70 non-Europeans) in 1920-1921.

PART II.

NOTIFICATION OF INFECTIOUS DISEASES.

PREPARED BY DR. A. W. REID, ASSISTANT MEDICAL OFFICER OF HEALTH.

The Public Health Act No. 36 of 1919, promulgated on the 24th June, 1919, came into operation on the 1st of January, 1920, repealing Acts 4 of 1883, 39 of 1885 and 23 of 1897 of this Province. Under Section 18 the provisions of the new Act, in so far as they concern notifiable infectious diseases, apply to small-pox (which term shall be deemed to include the form known as "Amaas" or Kafir-pox and any other disease resembling small-pox (except chicken-pox), scarlatina or scarlet fever, typhus fever, diphtheria or membranous croup, erysipelas, puerperal fever (including septicaemia, pyaemia, septic pelvic cellulitis, or other serious septic condition occurring during the puerperal state), Asiatic cholera, enteric or typhoid fever (including para-typhoid fever), epidemic cerebro-spinal meningitis or cerebro-spinal fever, acute poliomyelitis, leprosy, plague, anthrax, glanders, rabies, Malta fever, sleeping sickness or human trypanosomiasis, and all forms of tuberculosis which are clinically recognisable apart from reaction to the tuberculin test.

In addition to the above diseases, Government Notice No. 1629 of 1919, published in the *Union Gazette* of 12th December, 1919, declared Yellow Fever, ophthalmia neonatorum (all forms) and gonorrhoeal ophthalmia to be notifiable diseases within the Union with effect from the 1st January, 1920.

Government Notice 1087 of 1920, promulgated on the 21st June, 1920, declared acute primary pneumonia and influenzal pneumonia (including all forms of acute inflammation of the lungs of influenzal origin), to be notifiable diseases within the Municipality of Capetown and elsewhere.

Government Notice No. 1526 of 1920, published in the *Union Gazette* of 27th August, 1920, declared Infectious Encephalitis (which term shall be deemed to mean and include Acute Encephalitis Lethargica, Acute Polio-encephalitis and all other forms of Acute Encephalitis of similar causation) to be a notifiable disease throughout the Union.

And Government Notice No. 1507 of 1922, declared Epidemic Influenza to be a notifiable disease within the Municipality of Capetown in so far as the first case in a house within a period of 28 days is concerned; subsequent cases of the disease occurring during the said period being non-notifiable.

Every medical practitioner who becomes aware that any person is suffering or has died from a notifiable infectious disease must immediately furnish a written certificate of notification thereof to the local authority, and inform the head of the household or occupier of the premises, and any person nursing or in attendance on the patient, of the infectious nature of the disease and the precautions to be taken to prevent its conveyance to others.

Where any person is suffering from any notifiable infectious disease, Section 19 of the Public Health Act makes it compulsory for the head of the family, or in his default or absence the nearest adult relation of the patient present on the premises, or in default or absence of any such relation the person in charge or in attendance on the patient, or in default of any such person the occupier of the premises, to immediately give notice thereof to the local authority.

The following regulations dealing with the notification of infectious diseases framed under Section 22 of the Public Health Act, were promulgated under Government Order No. 4 on the 2nd January, 1920.

Notification by Persons in Charge of Schools, etc.

Every person in charge of a school, orphanage or similar institution, shall immediately report to the local authority the occurrence in such institutions of any case of any notifiable infectious disease, or of measles, German measles, whooping cough, venereal disease, granular ophthalmia (trachoma), or any disease of the skin or scalp which appears to be infectious or communicable. Such report shall be in writing, and shall state as regards each case the name, age, sex, race, and home address of the patient, the nature of the disease, the date of onset of illness, and any available information as to the probable place and source of infection.

Notification by Owners or Occupiers of Land.

The owner or occupier of any land on which natives or coloured persons reside shall immediately report to the local authority the presence or occurrence

of any case of infectious disease on such land. Such report shall be in writing, and shall state as regards such case the name, age, sex, race, and address of the patient, the nature of the disease, the date of onset of illness, and any available information as to the probable place and source of infection.

Notification by Employers.

Every employer of labour shall immediately report to the local authority the occurrence of any case of infectious disease among his employees. Such report shall be in writing and shall state the particulars mentioned in regulation with respect to notification by persons in charge of schools, etc.

Notification Fees.

The fee payable by the local authority to a medical practitioner for each case of infectious disease notified by him immediately and in accordance with section *twenty* of Act No. 36 of 1919, shall be two shillings and sixpence, but no fee shall be payable in respect of any case notified by a medical practitioner in the course of his duty as officer of the Government or of a local authority or of any public or State-aided hospital or institution, or which has been notified to the same local authority by the same medical practitioner within the preceding six months.

Any person guilty of an offence against, or contravention of, or default in complying with, any provision of these regulations, shall be liable on conviction, to a fine not exceeding twenty-five pounds (£25).

Under Government Order No. 1029 dated 27th June, 1922, the following regulations regarding the closing of schools in connection with outbreaks of infectious disease and framed under Section 36 of the Public Health Act, 1919, came into force from that date.

1. (a) Any local authority mentioned in or proclaimed under the First Schedule to Act No. 36 of 1919, may where deemed necessary for the purpose of preventing the spread of any infectious disease, issue an order closing all schools or any school, or any specified section of or class in any school, within its district.

(b) No such closing order shall be for a period exceeding ten school days unless the concurrence of the Administrator to closure for a longer period has first been obtained, and without the like concurrence no second closing order may be issued by the local authority applying to the same school and in respect of the same disease within the period of one month.

(c) Immediately on the issue of a closing order, the local authority shall, by telegraph or other expeditious means, notify the Administrator of the issue thereof and the reasons therefore. If the local authority desires to extend the order beyond the period of ten school days, it shall at the same time request the concurrence of the Administrator thereto.

(d) The Administrator shall, by telegraph or other expeditious means, convey to the local authority his reply to such request within three days from the date of receipt thereof. If in any case the Administrator refuse to concur in the extension of any such closing order, or in the issue of a second closing order, the local authority may report to the Minister for his decision in the matter, and any decision given by the Minister shall be final and conclusive.

2. (a) Where a local authority not mentioned in or proclaimed under the First Schedule to Act No. 36 of 1919 deems it necessary for the purpose of preventing the spread of any infectious disease that all schools or any school, or any specified section of a class in a school within its district, should be closed, or if already closed for a period, that the closing order should be extended for a further period, it shall submit, with all necessary particulars, a request for closure to the Administrator, who may at his discretion issue a closing order.

(b) If a closing order, or an order extending the period of an existing closing order, as requested by the local authority is not issued by the Administrator within twenty-four hours of the receipt of such request, the local authority may report to the Minister for his decision in the matter, and any decision given by the Minister shall be final and conclusive.

3. The expression "local authority," as used either in regulation 1 or 2 includes also, when the local authority by resolution so determines, a committee of its members or its medical officer of health.

4. Any person failing to comply with, or otherwise acting in contravention of, a closing order issued under these regulations shall be liable on conviction to a fine not exceeding twenty-five pounds.

5. These regulations supersede and repeal all regulations previously in force regarding the closing of schools for the purpose of preventing the spread of infectious disease.

Under Government Notice No. 471, dated the 13th March, 1923, the following regulations *re* exclusion from school on account of infectious disease came into effect from that date:—

REGULATIONS *re* EXCLUSION FROM SCHOOL ON ACCOUNT OF INFECTIOUS DISEASE.

Application of Regulations.

1. The provisions of the Schedule hereto shall apply in respect of all children attending any school and shall also apply to all teachers of such schools, subject to the modifications in respect of teachers specified therein. In these regulations and in the Schedule hereto the word “school” means any public or private establishment for primary or secondary or higher education attended by six or more children and including a hostel or boarding-house kept for housing pupils at any such establishment, and further includes a Sunday school; and the words “principal or person in charge” of a school mean and include the person in charge of any department of a school where there is no principal or person in charge of the whole school.

Duties of Principals of Schools.

2. The principal or person in charge of every school—

- (a) shall immediately notify to the medical officer of health or, where there is no such officer, to the town clerk or secretary of the local authority, or if there is no local authority other than the magistrate, then to the magistrate of the district, every case of scarlatina or scarlet fever, diphtheria, smallpox, enteric or paratyphoid fever, dysentery, typhus, tuberculosis, leprosy, syphilis, acute poliomyelitis, epidemic cerebro-spinal meningitis, erysipelas, acute ophthalmia or conjunctivitis, or trachoma, coming to his knowledge amongst the children attending a school, and *every first case in a school class* of measles or German measles, mumps, whooping-cough, chicken-pox or contagious impetigo;
- (b) shall exclude from the school children or teachers suffering from, or who have been exposed to the infection of, any disease mentioned in the Schedule hereto for the periods specified in, and in accordance with the provisions of, the said Schedule;
- (c) shall, where a child who has been absent from school owing to his suffering from, or having been exposed to the infection of, a disease mentioned in clause (a) hereof, returns to school without a medical certificate of recovery and freedom from infection, satisfy himself by personal investigation that the child appears to be well and is clean in person and clothing. In the towns mentioned in or proclaimed under the First Schedule to Act No. 36 of 1919, or where the case has been treated by a medical practitioner, a medical certificate shall be furnished in every such case;
- (d) shall, where there is any doubt as to whether a child is an immune contact or a susceptible contact (as defined in the Schedule hereto), regard and deal with such child as a susceptible contact.

Duties of Parents or Guardians.

3. Where any school child has developed any disease mentioned in the Schedule hereto the parent or guardian—

- (a) shall promptly on such fact coming to his knowledge, notify the same to the principal or person in charge of the school ordinarily attended by such child;
- (b) shall, where so required by the Schedule hereto and until the measures or precautions therein specified have been carried out or complied with, discontinue the attendance at school of the sick child or other children who may have been exposed to infection (contacts) for the periods specified in, and in accordance with the provisions of, the Schedule;
- (c) shall exercise due care to prevent such child from conveying the infection to others, either at home or elsewhere, and to keep children living in the same or any other house away from contact with the infected child;
- (d) shall after the termination of every case of scarlet fever or scarlatina, diphtheria or membranous croup, smallpox, or enteric fever, and where

the local authority has not carried out disinfection of the infected premises, bedding and clothing, wash all washable articles, freely expose to sunlight and fresh air all other clothing or bedding, thoroughly scrub the floor of the room and all wood-work and furniture with soap and hot water, and thereafter keep the doors and windows open for at least three hours.

School Boarding Establishments.

4. In the case of school boarding establishments—

- (a) The person in charge of the establishment shall comply with the provisions of, and shall carry out the duties imposed on parents or guardians of school children by, regulation 3 hereof;
- (b) where a child is found to be suffering from a disease mentioned in the Schedule hereto, the provisions of the Schedule in respect of “contacts” shall, subject to the discretion of the medical officer of health if there be such an officer for the area, apply only to those children who have been occupying the same bedroom or dormitory as the patient.

Duties and Powers of Medical Officers of Health.

5. In the case of local authorities specified in or proclaimed under the First Schedule to the Public Health Act, No. 36 of 1919—

- (a) Where a case of notifiable infectious disease in a school child is notified to the local authority or otherwise comes to the notice of the medical officer of health, that officer shall immediately notify the facts to the principal or person in charge of the school concerned, and such principal or person in charge, if so requested by the medical officer of health, shall furnish to him without delay a complete list of the pupils attending thereat, together with their names and addresses.
- (b) The medical officer of health may, by written notice to the parent or guardian of the child, and to the principal or person in charge of the school—
 - (i) reduce the period of exclusion from school of an infected child or of a contact where he is satisfied, after bacteriological examination or the adoption of special measures, that this will not entail risk of spread of the disease;
 - (ii) increase the period of exclusion where he has reasonable grounds for believing, on bacteriological or other evidence, that any child or person is a “carrier” of the infection—in a virulent form—of diphtheria, scarlet fever, epidemic cerebro-spinal meningitis, acute poliomyelitis or enteric fever, and capable of conveying such disease to others.

Penalties.

6. Any person failing to comply with any provision or carry out any requirement of these regulations shall be liable on conviction to a fine not exceeding twenty-five pounds.

Existing Regulations and By-laws Rescinded and Superseded.

7. These regulations rescind and supersede all by-laws and regulations heretofore in force regarding the restriction of attendance or exclusion of children from school on account of infectious disease, save and except the regulations regarding the closing of schools in connection with outbreaks of infectious disease promulgated under Government Notice No. 1029 of 27th June, 1922.

SCHEDULE.

In this Schedule—

- “patient” means a person suffering from the infectious disease referred to in the context;
- “contact” means a person who has been exposed to the infection of the disease referred to in the context, from having been in contact or associated with or living in the same house with a person suffering from the disease. In the case of a boarding-house or hotel or other large establishment the medical officer of health—or if there be no medical officer of health, the medical man in attendance—shall decide whether all persons living therein are to be dealt with as contacts, or if not, what persons are to be exempted from restrictions;

“immune contact” means a contact who has previously had the disease and, although capable of “carrying” the infection to others, is presumably not liable to a second attack;

“susceptible contact” means a contact who has not previously had the disease and is consequently liable to contract it;

“removal from infection” means, as the case may be—

- (a) removal of the patient from, and disinfection or thorough cleansing of, the infected dwelling, bedding, clothing and articles; or
- (b) removal of the contact from the infected dwelling, with bathing of his body and disinfection or cleansing of his clothing; or
- (c) where both patient and contact remain in the infected dwelling, the complete recovery of the patient and disinfection or thorough cleansing of the infected dwelling, bedding, clothing and articles, with bathing of the bodies of both patient and contact.

<i>Disease.</i>	<i>Patient may Return to School.</i>	<i>Contacts may Return to School.</i>
Scarlet Fever or Scarlatina ..	After complete recovery and no sore throat, no discharge from ears or nose, and no recently enlarged glands or discharging sores. Minimum exclusion, 6 weeks from onset.	Immune contacts—at once, after disinfection and removal from infection. Susceptible contacts—8 days after disinfection and removal from infection, except where patient and contacts remain in the same dwelling, in which case contacts may return to school at the same time as the <i>last case</i> in the dwelling.
Diphtheria	After complete recovery, and no discharge from ears or nose. Minimum exclusion, 4 weeks from onset.	Immune contacts, or contacts shown by the Schick test to be insusceptible—at once, after disinfection and removal from infection. Susceptible contacts—8 days after disinfection and removal from infection, except where patient and contacts remain in the same dwelling, in which case contacts may return to school at the same time as the <i>last case</i> in the dwelling.
Measles	14 days after first appearance of rash. Where a case of measles has occurred in a class, the medical officer of health may, at his discretion, close the class on or about the 9th day after the sickening of the first child for a period of 7 days, or may exclude susceptible children in the class for a similar period.	Immune contacts—at once, provided they are kept apart from patient. Susceptible contacts—7 days after the return to school of the last case in the dwelling.
German Measles (<i>Rubella</i>) ..	Same restrictions as for ordinary measles, but modifiable at the discretion of the medical officer of health.	—
Whooping-cough	6 weeks after commencement of whooping.	Immune contacts—at once, provided they are kept apart from patient. Susceptible contacts—3 weeks after disinfection and removal from infection.
Chicken-pox	After complete disappearance of scabs. Minimum exclusion—14 days from onset.	Immune contacts—at once, provided they are kept apart from patient. Susceptible contacts—14 days after disinfection and removal from infection.
Smallpox	After complete disappearance of scabs. Minimum exclusion—4 weeks.	Contacts who have had smallpox or have been successfully vaccinated at least 7 days and not more than 5 years previously—at once, after disinfection and removal from infection. Other contacts—14 days after disinfection and removal from infection.
Influenza ; Sore Throat ..	After complete recovery	No exclusion.
Enteric or Typhoid Fever ; Paratyphoid ; Dysentery	After complete recovery. Minimum exclusion—4 weeks.	No exclusion.

<i>Disease.</i>	<i>Patient may Return to School.</i>	<i>Contacts may Return to School.</i>
Typhus	After complete recovery. Minimum exclusion—4 weeks.	Immune contacts—at once, after disinfection, delousing and removal from infection. Susceptible contacts—14 days after disinfection and removal from infection. <i>N.B.</i> —Contacts must be thoroughly clean and free from lice or nits.
Mumps	7 days after disappearance of swelling.	At once, but to be watched both by parents and teachers, and excluded on appearance of any symptoms.
Tuberculosis of lungs ; leprosy ; syphilis.	On production of a medical certificate of recovery and freedom from infection.	No exclusion.
Tuberculosis—other forms of ..	No exclusion, unless with discharging sores.	No exclusion.
Acute poliomyelitis ; epidemic cerebro-spinal meningitis.	On production of a medical certificate of recovery and freedom from infection.	No exclusion, unless suffering from sore throat or discharge from nose.
Erysipelas	After complete recovery	No exclusion.
Ophthalmia, acute (inflammation of the eyes), or acute conjunctivitis.	After complete recovery, with eyes no longer red or discharging.	No exclusion.
Trachoma (chronic granular eyelids).	On production of a medical certificate of recovery and freedom from infection.	No exclusion.
Scabies or itch	After complete disappearance of rash, spots and itching.	No exclusion, but keep under observation.
Ringworm—of scalp	After affected spots have become smooth and shiny and no broken off hairs (stumps of hairs) can be seen on careful examination, preferably with a lens.	No exclusion, but keep under observation.
Ringworm—of body	After complete recovery, and when no “rings” or spots with raised, rough edges can be seen.	No exclusion, but keep under observation.
Favus, or yellow ringworm, or white ringworm (“Witkop”) of the scalp.	After complete recovery	No exclusion.
Contagious impetigo	After complete recovery	No exclusion, but keep under observation.
Lice (<i>Pediculosis</i>)	After complete cleansing and freeing of head, body and clothing from lice and nits.	No exclusion, but keep under observation.

The foregoing requirements shall apply to school teachers as well as to school children, save and except that where a teacher who has previously had the disease resides on premises where a case of scarlet fever occurs and is not removed therefrom, such teacher may continue to attend school provided that the patient, with his nurse or attendant, is properly isolated in a separate room or part of the dwelling and that the teacher does not come in contact with the patient in any way, either directly or indirectly. He should have any clothing which may have been exposed to infection disinfected or washed.

Teachers who are typhus contacts need not be excluded from school provided they, with their families or others in the same dwelling, are clean and free from lice.

Where there is a medical officer of health, a certificate by him—or by the medical attendant and endorsed by the medical officer of health—to the effect that the patient is completely recovered and free from infection must be obtained by the parent or guardian and furnished to the principal or person in charge of the school on or before the patient's return thereto. Where there is no medical officer of health but where a medical man has treated the case, a certificate by the latter to the same effect must be similarly obtained and furnished.

Before being allowed to return to school the patient must in every case have a bath with soap and hot water and have clean clothing.

Enteric or Typhoid Fever, and Continued Fever.—There were 379 cases notified during the year, of which 215 were Europeans (103 males and 112 females) and 164 were non-Europeans (83 males and 81 females), as compared with 504 in the previous year, of which 260 were Europeans and 244 non-Europeans, and 740 for 1920-1921 of which 400 were Europeans and 340 non-Europeans.

Of the cases belonging to the year under report, 15 Europeans (8 males and 7 females) and 16 non-Europeans (10 males and 6 females) of the notified cases were diagnosed as not suffering from enteric fever after they had been taken into the City Hospital for treatment.

Concerning the European cases under review, 16 contracted the disease outside the Municipality, 3 having introduced the disease from overseas, and the remaining 13 imported the disease from other parts of the Union, with the exception of 2, which contracted the disease in Rhodesia. Of the non-Europeans, 10 contracted the disease outside the Municipal area, of whom 2 introduced the disease from overseas, and the remaining 8 contracted the disease from other parts of the Union. This leaves 199 Europeans and 154 non-Europeans local cases; one of these non-Europeans being a vagrant. Two hundred and thirty cases of the disease (124 Europeans and 106 non-Europeans) were admitted to the City Hospital for treatment.

The sequence of months, classified as to number of cases notified in each month, commencing with the month having the smallest number of cases and graduating to the largest is as follows:—August (6), October (12), July and June (16 each), November (18), September (19), December (32), May (35), March (47), February (51), January (57) and April (70).

The disease was most prevalent from December to May, and began to lessen in June.

The deaths occurring from this disease amounted to 25 Europeans, and 30 non-Europeans, giving death-rates from enteric fever of 0·23 and 0·36 per 1,000 of the European and non-European populations respectively. For the previous year the death-rates were 0·26 and 0·56 for Europeans and non-Europeans respectively, and for 1920-1921 they were 0·42 for Europeans and 0·63 for non-Europeans.

There were 290 houses infected with the disease, and of these 260 had one case each, 18 had two cases each, 7 had three cases each, 2 had four cases each, 2 had five cases each, one had six cases, and in addition to the above there were 11 cases which occurred in institutions, and one vagrant, representing 353 notified cases of enteric fever, which, added to the 26 imported cases referred to above, gives the total of 379 as shown in Table XII.

Of 83 of the drained houses the drains were tested and 33 were found satisfactory, and 50 were found defective and since repaired.

The incidence rates, *i.e.*, number of notified cases per 1,000 of the population, were 2·00 for Europeans, 1·96 for non-Europeans and 1·98 for All Classes, as against 2·52 for Europeans and 2·96 for non-Europeans and 2·71 for All Classes in the previous year. For the year 1920-1921, the incidence rates were 4·08 for Europeans, 4·17 for non-Europeans and 4·01 for All Classes. The percentage case mortality was 13·02 for Europeans and 23·78 for non-Europeans. For the cases actually belonging to the City the percentage case mortality was 13·06 for Europeans and 23·38 for non-Europeans.

As far as circumstances would permit an endeavour was made to inoculate all contacts with typhoid and para-typhoid vaccine. In this way about 103 persons were inoculated by the Department, and a number of others by the practitioners in attendance of which I have no record, but 652 ampoules were supplied to medical practitioners for that purpose.

The adjoining Table (Table XII) gives the number of notified cases in each ward, also cases imported from overseas, and cases contracted in other parts of the Union classified as to race.

TABLE XII.

CASES OF ENTERIC FEVER FOR THE YEAR 1ST JULY, 1922, TO 30TH JUNE, 1923,
CLASSIFIED AS TO RACE AND WARD OF THE CITY TO WHICH THEY BELONG,
TOGETHER WITH BALANCE OF CASES.

Race.	Wards of the City.														Balance of Cases.			Total Cases.
	1 Sea Point.	2 Harbour.	3 West Central.	4 Kloof.	5 Park.	6 East Central.	7 Castle.	8 Woodstock.	9 Salt River.	10 Mowbray.	11 Maitland.	12 Rondebosch.	13 Claremont.	14 Kalk Bay.	Cases introduced from Oversea.	Cases contracted outside of City.	No fixed place of abode.	
European	28	17	3	12	9	11	3	21	50	17	4	9	13	2	3	13	..	215
Non-European	1	9	6	9	2	14	15	12	24	2	15	18	23	3	2	8	1	164
All Classes	29	26	9	21	11	25	18	33	74	19	19	27	35	5	5	21	1	379

From the above Table it will be seen that Ward 9 (Salt River) and Ward 13 (Claremont) and Ward 8 (Woodstock) were the Wards that were chiefly affected, and more especially Ward 9 in which 50 European and 24 non-European cases occurred. From Ward 13, 13 European and 23 non-European cases were notified, and from Ward 8, 21 European and 12 non-European cases. For the previous year Ward 9 had 34 European and 37 non-European cases of enteric fever; Ward 13, 14 European and 25 non-European cases, and Ward 8, 69 European and 27 non-European cases. The lowest number of cases was from Kalk Bay (Ward 14) from which 5 cases were reported (2 European and 3 non-European).

Diphtheria.—During the year 157 cases were reported, 127 being Europeans (53 males and 74 females) and 30 being non-Europeans (15 males and 15 females). For the previous year there were 140 cases (115 Europeans and 25 non-Europeans) and for 1920-1921 there were 108 cases (82 Europeans and 26 non-Europeans). Of the cases under report one European female, 3 non-European males, and one non-European female were found not to be suffering from the disease after they were admitted to the City Hospital for treatment and isolation.

Seven of the cases contracted the disease outside the City, and of these, one European introduced the disease from overseas, and 4 Europeans and 2 non-Europeans contracted the disease in other parts of the Union. There were 87 cases of the disease admitted to the City Hospital for treatment, and of these 69 were Europeans, and 18 non-Europeans. The deaths registered as due to Diphtheria were 13 Europeans and 7 non-Europeans, as against 9 Europeans and 6 non-Europeans for the previous year.

The cases were most numerous in March when 30 were notified; next in July when 20 were notified; and next in November when 18 were notified. The lowest number of cases occurred in October when 2 were notified. The death-rates from this disease were 0.12 for Europeans, and for non-Europeans 0.08, as compared with 0.86 for Europeans and 0.72 for non-Europeans in the previous year and 0.06 for Europeans and 0.04 for non-Europeans in 1920-1921.

The percentage mortality of the cases was 9.45 for Europeans and 23.33 for non-Europeans for all cases and deaths, *i.e.*, not deducting imported cases, as compared with 10.43 for Europeans and 24.00 for non-Europeans in the previous year. For the cases and deaths actually belonging to the City the percentage mortality was, for Europeans 9.84 and for non-Europeans 17.86 as against 10.58 for Europeans and 24.00 for non-Europeans in the previous year. All the non-Europeans in the preceding year were local cases. As will be observed from Table XIII, the Wards in which the largest number of cases occurred were Claremont (33 cases), Sea Point (17 cases), Woodstock and Salt River (15 cases each), Kloof (13 cases). The lowest number of cases occurred in Ward 2 (Harbour) and Ward 6 (East Central) from each of which two cases were notified.

TABLE XIII.

CASES OF DIPHTHERIA FOR THE YEAR 1ST JULY, 1922, TO 30TH JUNE, 1923,
CLASSIFIED AS TO RACE AND WARD OF THE CITY TO WHICH THEY BELONG,
TOGETHER WITH BALANCE OF CASES.

Race.	Wards of the City.														Balance of Cases.		Total cases.
	1 Sea Point.	2 Harbour.	3 West Central.	4 Kloof.	5 Park.	6 East Central.	7 Castle.	8 Woodstock.	9 Salt River.	10 Mowbray.	11 Maitland.	12 Rondebosch.	13 Claremont.	14 Kalk Bay.	Cases introduced from Oversea.	Cases contracted outside the City.	
European	14	1	..	12	9	2	3	12	14	8	4	10	26	7	1	4	127
Non-European ..	3	1	3	1	..	..	6	3	1	..	1	2	7	..	..	2	30
All Classes	17	2	3	13	9	2	9	15	15	8	5	12	33	7	1	6	157

Scarlet Fever.—During the year there were 69 cases reported as suffering from this disease; of these 60 were Europeans (25 males and 35 females) and 9 were non-Europeans (3 males and 6 females). Of these notified cases there were 9 Europeans (5 males and 4 females) and 3 non-Europeans (2 males and 1

female) who were found not to have the disease after their removal to the City Hospital for treatment.

For the previous year there were 104 Europeans and 9 non-Europeans notified, making a total of 113 cases, and for the year 1920-1921 there were 234 Europeans and 15 non-Europeans, producing a total of 249 cases. Two of the cases for the year under consideration, European males, introduced the disease from overseas, and one European male, 2 European females and 1 non-European female contracted the disease in other parts of the Union. Thirty-one European and 7 non-European cases of Scarlet Fever were admitted to the City Hospital for treatment. There were no deaths from this disease during the year.

Erysipelas.—Of this disease there were 44 cases notified, 35 being Europeans (13 males and 22 females) and 9 non-Europeans (2 males and 7 females).

Five of the notified cases were found not to be suffering from the disease when diagnosed in the City Hospital. Of these 2 were Europeans (one male and one female) and 3 non-Europeans (one male and 2 females). Two Europeans contracted the disease outside the City's boundaries and 11 European and one non-European cases were admitted to the City Hospital. For the previous year there were 34 cases of the disease (28 Europeans and 6 non-Europeans) and for 1920-1921 there were 31 cases (27 Europeans and 4 non-Europeans).

Puerperal Fever.—There were 32 cases notified during the year, 14 of which were Europeans and 18 non-Europeans.

Of these notified cases, 2 Europeans and 2 non-Europeans proved not to be cases when diagnosed in the City Hospital:

Seven Europeans and 19 non-Europeans were notified in the previous year and 10 Europeans and 20 non-Europeans in 1920-1921. One European case and one non-European case contracted the disease outside of the Capetown Municipality, being removed from outside the Capetown Municipal boundaries to institutions situate therein. Four Europeans and 7 non-Europeans died from this disease. Nine European and 10 non-European cases were admitted to the City Hospital.

Acute-Anterior Poliomyelitis.—During the year there was 1 non-European male notified as suffering from this disease as compared with 1 European female and one non-European female in the previous year, and one European male, 2 European females and one non-European female in 1920-1921.

The case belonging to the present year died, was 11 days old and was reported from Ward 11 (Maitland).

Leprosy.—During the year there were 7 cases of the disease notified, being one European female, 3 non-European males and 3 non-European females. For the previous year there were 8 cases (3 Europeans and 5 non-Europeans) and for 1920-1921 there were 4 cases (1 European and 3 non-Europeans). With regard to the cases for the present year, the European female contracted the disease in the Caledon district and was removed therefrom to the Old Somerset Hospital preparatory to transfer to Robben Island. The 6 non-Europeans were local cases.

Concerning the non-European local cases for the present year, they were all admitted to the Old Somerset Hospital preparatory to transfer to Robben Island. One non-European male was a resident of Ward 6 (East Central), one of Ward 8 (Woodstock) and the other of Ward 10 (Mowbray). Regarding the non-European females, one was a resident of Ward 7 (Castle), one of Ward 9 (Salt River) and the remaining one of Ward 11 (Maitland).

Epidemic Cerebro-Spinal Meningitis.—Nine cases of this disease were notified during the year, 2 European males, 2 European females, 2 non-European males and 3 non-European females.

Seven cases were notified in the previous year, of which 6 were Europeans and one a non-European. For 1920-1921, there were five cases notified (4 Europeans and 1 non-European). With regard to the cases for the present year, one European male, one European female, one non-European male and 2 non-European females were treated in the City Hospital, but after diagnosis, one non-European male and one non-European female of these proved not to have the disease. One non-European male was treated in the New Somerset Hospital. The remaining European male, European female and non-European female were treated at home. Four Europeans and 2 non-Europeans died.

Typhus.—There were 2 cases notified, one a European male, and the other a Native male. For the previous year there were 2 Native males notified, and in 1920-1921 there were 12 Native males. The European case was a resident of Ward 11 (Maitland), and all the Native males for the present and previous years and for 1920-1921 became infected whilst residing at the N'dabeni Location, which is just outside the Capetown Municipality. All the cases were removed

to the Rantzkie's Farm Hospital for treatment. There were no deaths from this disease during the year.

Infective Encephalitis.—Of this disease 4 cases were notified, one being a European male, 2 being European females, and one a non-European female. The European male was a resident of Ward 2 (Harbour) and was treated in the City Hospital and proved to be a case of cardiac hypertrophy. One of the European females was a resident of Ward 8 (Woodstock) and the other of Ward 13 (Claremont). The non-European female was a resident of Ward 12 (Rondebosch). The 2 European females and the non-European female were treated at their respective homes and all 3 died.

For the previous year there were 6 Europeans and no non-Europeans and for 1920-1921 there were 4 Europeans and 2 non-Europeans.

Ophthalmia Neonatorum.—During the year 31 cases of this disease were notified, 9 being Europeans (4 males and 5 females) and 22 being non-Europeans (8 males and 14 females). Last year there were 50 cases (11 Europeans and 39 non-Europeans) and for 1920-1921 there were 35 cases (7 Europeans and 28 non-Europeans). For the year under report, 6 of the Europeans and 15 of the non-Europeans were treated, either in hospitals or at clinics.

Tuberculosis: (a) Notifications.—Of this disease there were 700 new cases notified or discovered, consisting of 93 European males, 48 European females, making a total of 141 Europeans, and 287 non-European males and 272 non-European females, making a total of 559 non-Europeans. Two of the non-European males proved not to be cases of the disease when diagnosed at the City Hospital.

For the previous year the figures were, 637 new cases, and of these 156 were Europeans (92 males and 64 females), and 481 were non-Europeans (205 males and 276 females), and for 1920-1921 there were 656 new cases, 132 being Europeans (75 males and 57 females) and 524 non-Europeans (234 males and 290 females).

During the year 35 Europeans and 65 non-Europeans were admitted to the City Hospital for treatment.

The distribution of the cases for the year under revision amongst the Wards of the City, together with the balance of the cases, will be seen from the following Table:—

TABLE XIV.

NEW CASES OF TUBERCULOSIS FOR THE YEAR 1ST JULY, 1922, TO 30TH JUNE, 1923, CLASSIFIED AS TO RACE AND WARD OF THE CITY TO WHICH THEY BELONG, TOGETHER WITH BALANCE OF CASES.

Race.	Wards														Balance of Cases.			Total Cases.
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	Cases intro-duced from Oversea.	Cases con-tracted out-side the City.	No. Fixed Place of Abode.	
	Sea Point.	Harbour.	West Central.	Kloof.	Park.	East Central.	Castle.	Woodstock.	Salt River.	Mowbray.	Maitland.	Rondebosch.	Claremont.	Kalk Bay.				
European ..	10	14	7	11	10	10	5	9	17	11	6	4	9	4	6	8	..	141
Non-European	5	23	33	35	7	103	92	34	34	11	51	37	36	20	..	32	6	559
All Classes ..	15	37	40	46	17	113	97	43	51	22	57	41	45	24	6	40	6	700

From the foregoing Table it will be seen under the heading, "Balance of cases", that 6 Europeans introduced the disease from overseas, and 8 contracted the disease in other parts of the Union, and that of the non-Europeans 6 had no fixed abode, and 32 contracted the disease in other parts of the Union. The largest number of cases occurred in Ward 6 (East Central) from which 113 were notified, next in Ward 7 (Castle) from which 97 were notified and next in Ward 11 (Maitland) from which 57 were notified. The fewest cases occurred in Ward 1 (Sea Point), Ward 5 (Park) and Ward 10 (Mowbray), from which 15, 17 and 22 cases respectively were notified.

TABLE XV.

SHOWING LENGTH OF RESIDENCE IN THE CITY OF CAPE TOWN OF PERSONS NOTIFIED AS SUFFERING FROM TUBERCULOSIS AND NOT SINCE DEAD, FROM 1ST JULY, 1922, TO 30TH JUNE, 1923.

Age.	Race.	InCape-town, under 6 months.	InCape-town, 6 months & under 1 year.	InCape-town, 1 year & under 2 years.	InCape-town, 2 years & under 3 years.	InCape-town, 3 years & under 4 years.	InCape-town, 4 years & under 5 years.	InCape-town, over 5 years.	All Life in Cape-town.	No Record	Total.
0—1 years.	E.	..	..	..	..	..	..	..	1	..	1
	Non-E	..	..	..	..	..	..	..	1	..	1
1—5 years.	E.	..	..	1	..	..	..	..	1	..	2
	Non-E	..	..	..	..	..	..	..	6	2	8
5—15 years.	E.	1	..	..	1	..	..	1	1	..	4
	Non-E	..	1	..	..	1	2	3	21	5	33
15—25 years.	E.	2	..	..	1	..	..	4	7	1	15
	Non-E	4	2	3	4	..	1	17	35	3	69
25—45 years.	E.	5	2	4	2	..	2	14	4	..	33
	Non-E	6	..	2	5	4	5	41	19	5	87
45 years and over.	E.	3	1	..	..	2	..	8	1	1	16
	Non-E	2	..	..	..	..	..	19	9	2	32
Totals	E.	11	3	5	4	2	2	27	15	2	71
	Non-E	12	3	5	9	5	8	80	91	17	230

It will be observed from Table XV, that there were 71 Europeans and 230 non-Europeans who were notified during the year under report and who survived at the end of that term.

Included in the cases shown in Table XIV as imported, are cases taken directly to institutions within the City of Capetown from beyond the City's boundaries, and the enumeration of these is as follows:—

Old Somerset Hospital One Non-European male.

New Somerset Hospital One European female, one Non-European male and three Non-European females.

City Hospital One European male, two Non-European males and two Non-European females.

Rondebosch & Mowbray Cottage Hospital .. One Non-European male.

Woodstock Cottage Hospital One Non-European male.

There were also 2 non-European males and 3 non-European females brought into the Valkenberg Mental Hospital, and one non-European female brought into the House of Correction from outside the City who were found to be suffering from tuberculosis.

With regard to Multiple Notification, the details are as follows:—Concerning new cases notified during the year under report, 5 European and 52 non-European persons were notified twice, 5 non-European persons were notified three times and one non-European 4 times. With regard to cases originally notified in previous years, 5 Europeans and 47 non-Europeans were notified again in the period under review; 10 of these non-Europeans being notified twice in the present year, and one non-European 3 times.

On June 30th, 1923, the number of cases known to the Department to be still living in the City were 88 Europeans (54 males and 34 females) and 351 non-Europeans (143 males and 208 females). In the previous report the respective figures were 89 Europeans (43 males and 46 females) and 380 non-Europeans (166 males and 214 females).

Amongst the cases included in Tables Nos. XIV and XVI and Table "C" in the appendix, there were 27 deaths of Europeans (19 males and 8 females) and 91 non-Europeans (44 males and 47 females) without any previous notification; the reason for the non-notification being that the disease was only discovered just

before or after death. There were 10 inquests on the non-European cases, and the verdict was that death had resulted from a tubercular affection. There were no inquests on the European cases.

(b) *Mortality*.—Amongst the European population the number of deaths certified as due to pulmonary tuberculosis was 64 and to other tuberculosis affections 18, giving a death-rate of 0·76 from tuberculosis. Of these deaths 3 did not properly belong to the City, and on these being deducted the corrected death-rate of 0·74 is obtained. Concerning the non-European population, there were 322 deaths from pulmonary tuberculosis and 55 from other forms of tuberculosis, producing a death-rate of 4·51. Amongst these were 22 deaths of persons not belonging to the City, and by deducting these a corrected death-rate of 4·24 is obtained.

The gross and corrected death-rates for All Classes were 2·40 and 2·27 respectively.

For the previous year the gross tuberculosis death-rate was 1·04 for Europeans, 3·71 for non-Europeans and 2·23 for All Classes, and the corrected death-rate, 0·97, 3·46 and 2·08 respectively, for Europeans, non-Europeans and All Classes. For 1920-1921 the corresponding gross death-rates were 0·81, 4·36 and 2·41 and the corrected death-rates, 0·37, 4·10 and 2·25.

The length of residence of the persons dying from tuberculosis during the year is given in the following table:

TABLE XVI.

SHOWING LENGTH OF RESIDENCE IN CAPETOWN OF PERSONS DYING FROM TUBERCULOSIS FROM JULY 1ST, 1922, TO 30TH JUNE, 1923.

Age.	Race.	InCape-town, under 6 months.	InCape-town, 6 months & under 1 year.	InCape-town, 1 year & under 2 years.	InCape-town, 2 years & under 3 years.	InCape-town, 3 years & under 4 years.	InCape-town, 4 years & under 5 years.	InCape-town, over 5 years.	All Life in Cape-town.	No Record	Total.
0—1 years.	E. Non-E	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	1 13	.. 1	1 14
1—5 years.	E. Non-E	.. ..	.. 1	.. 1	.. ..	.. ..	.. ..	.. ..	2 31	.. 5	2 38
5—15 years.	E. Non-E	1 1	.. 2	.. 1	.. ..	.. 2	.. ..	.. 2	3 17	.. 4	4 29
15—25 years.	E. Non-E	.. 6	.. 1	1 1	1 4	.. 3	.. 3	4 11	3 58	.. 7	9 94
25—45 years.	E. Non-E	1 11	1 1	1 4	3 12	2 6	1 5	15 64	13 45	.. 5	37 153
45 years and over.	E. Non-E	1 4	.. ..	.. ..	3 3	1 2	1 ..	19 27	3 10	1 3	29 49
Totals	E. Non-E	3 22	1 5	2 7	7 19	3 13	2 8	38 104	25 174	1 25	82 377

In addition to these deaths, one European and 15 non-Europeans, notified cases of tuberculosis, died from certified causes of death other than tuberculosis. The European died of cardiac weakness, and of the 15 non-Europeans, 2 died of valvular disease of the heart, 2 of nephritis, 2 of pleurisy, one of pneumonia, one of emphysema of lungs, one of meningitis, one of enteritis, one of bronchitis, one of general paralysis of the insane, one of cancer, one of heart disease and the remaining one of pertussis.

For comparison I subjoin the following Table of death-rates from tuberculosis for various centres:—

TABLE XVII.

COMPARATIVE TABLE OF TUBERCULOSIS DEATH-RATES FOR VARIOUS CENTRES.

District and Period.	Crude Death-Rate from Tuberculosis.	Crude Death-Rate from Tuberculosis corrected for Non-Residents.
Durban, year ended 30th June, 1923	..	0·95 (Europeans). 0·67 (Natives). 3·44 (Asiatics).
Johannesburg, year ended 30th June, 1923.	0·51 (Europeans). 2·23 (Eurafrians). 2·78 (Natives). 0·51 (Asiatics). 1·47 (All Classes).	0·45 (Europeans). 1·84 (Eurafrians). 1·92 (Natives). 0·51 (Asiatics). 1·68 (All Classes).
Bloemfontein, year ended 30th June, 1923.	0·58 (Europeans).	0·37 (Europeans).
Pietermaritzburg, year ended 30th June, 1923.	..	0·48 (Europeans).
East London, year ended 30th June, 1923.	0·34 (Europeans). 4·30 (All Non-Europ.). 2·00 (All Classes).	0·34 (Europeans). 4·00 (All Non-Europ.). 1·90 (All Classes).
Capetown, year ended 30th June, 1922.	1·04 (Europeans). 3·71 (All Non-Europ.). 2·23 (All Classes).	0·97 (Europeans). 3·46 (All Non-Europ.). 2·08 (All Classes).
Capetown, year ended 30th June, 1923.	0·76 (Europeans). 4·51 (All Non-Europ.). 2·40 (All Classes).	0·74 (Europeans). 4·24 (All Non-Europ.). 2·27 (All Classes).
Vide Table D in the Appendix.		

Pneumonia.—During the year there were 180 cases of Pneumonia which came to the knowledge of the Department, and of these 70 were Europeans (42 males and 28 females) and 110 were non-Europeans (67 males and 43 females). One of the non-European males contracted the disease outside the Capetown Municipality. Two of the Europeans (one male and one female) and 3 non-European males were found not to be cases after their admission to the City Hospital for treatment.

For the previous year there were 160 cases, 63 Europeans and 97 non-Europeans, and for 1920-1921 there were 48 cases, 17 Europeans and 31 non-Europeans.

For the present year the cases were most numerous in July when 57 were notified and next in August when 22 were notified. The monthly average for the remaining ten months was 10 cases. The great increase in July and August was caused by the outbreak of influenza in June and July, 1922, mentioned below. Forty-six cases were admitted to the City Hospital for treatment, 16 being Europeans and 30 being non-Europeans. There were 527 deaths from pneumonia consisting of 101 Europeans and 426 non-Europeans.

Influenza.—There were 26 cases of influenza notified, 23 being Europeans (19 males and 4 females) and 3 were non-European males. Three of the European males were members of the crew of a Norwegian barque calling at the Port and were removed to City Hospital where they were subsequently found to be cases of febricula. All the other cases were resident within the Municipality of Capetown. Ten European and 6 non-European cases were admitted to the City Hospital for treatment.

The outbreak of influenza during June and July, 1922, referred to in my last report, ended on the 31st July, 1922, beginning to diminish after the 6th of that month. During the prevalence of the disease about 640 cases were reported by medical practitioners; 320 absentees were reported by firms and 16 cases were reported by the Sanitary Inspectors.

There was an outbreak of the disease in the Salesian Institute from which 2 teachers and 67 boys were notified on the 30th May, 1923, and 2nd June, 1923, but in accordance with the Proclamation making the disease notifiable for the

first case in a house during a period of 28 days, only one of these is included in the notifications for influenza.

The deaths from this disease during the year amounted to 7 Europeans and 5 non-Europeans, as compared with 5 Europeans and 11 non-Europeans in the previous year, and one European and 20 non-Europeans in 1920-1921.

Anthrax and Malta Fever.—There was one European male case of the former disease and one non-European female of the latter disease who are not shown on Table "C" in the appendix, as they were notified as cases of erysipelas and enteric fever, respectively. These mis-diagnoses were discovered after the cases were admitted to the City Hospital for treatment.

PART III.

MEASURES TAKEN FOR THE PREVENTION AND SUPPRESSION OF NOTIFIABLE DISEASES.

PREPARED BY DR. A. W. REID, ASSISTANT MEDICAL OFFICER OF HEALTH.

Chapter III (Part I) of the Public Health Act, 1919, deals with the prevention and suppression of infectious diseases, and among the general provisions therein are the following:—

1. Provision for the inspection of infected premises and examination of persons suspected to be suffering from infectious disease.
2. Gives powers to local authorities to provide isolation hospitals, mortuaries, disinfecting and cleansing stations and ambulances.
3. The removal to a suitable hospital of any person certified to be suffering from an infectious disease if not accommodated, treated or nursed in such a manner as to adequately guard against the spread of the disease.
4. Power to a local authority to order the cleansing or disinfection of any premises or article necessary for preventing the spread or eradicating the infection of any infectious disease or otherwise preventing danger to health.
5. Power to remove to a cleansing station any dirty and verminous person.
6. To impose penalties on any person who, while knowingly suffering from any notifiable or proclaimed infectious disease, wilfully or negligently exposes himself in such manner as to be likely or liable to spread such disease in any street, public place, public building, shop, inn, hotel, church, or other place and/or frequented or occupied in common, or any person in charge of any person and knowing that such person is so suffering, so exposes such sufferer.
7. To impose penalties on any person who knowingly gives, lends, sells, pawns, transmits, removes or exposes, sends or permits to be washed in a public wash-house, laundry or other such place without previous disinfection, any clothing, bedding, article or thing contaminated with the infection of any notifiable or proclaimed disease.
8. To impose penalties on any person who, while knowingly suffering from any such disease, handles, conveys, or otherwise comes in contract with any food or daily produce, aerated water or other article intended for human consumption, or carries on any trade or occupation likely or liable to spread such disease.
9. Infected premises not to be evacuated or let without previous disinfection.
10. To impose penalties on any person knowingly suffering from a notifiable infectious disease who enters any public conveyance without the driver's or conductor's consent, or places any article contaminated with the infection of any such disease in a public conveyance without consent.

Prompt enquiries are made by the District Inspectors into each case notified. For this purpose a form is drawn up for each particular disease and the Inspector enters the answers given and the result of his enquiries against each question. These enquiries are made, not only for statistical purposes, but chiefly to gain information as to the source of infection, whether contracted at school, employment, in the streets or any other source which can be traced. They are necessary as a first stage in throwing light on the history of first cases and supplying clues for further minute investigation into the source of infection. They may also

reveal any condition common to two or more cases from which infection may be spreading, such as a dairy, school, undetected case or source of water supply. Further, they give information as to how far isolation and other practicable precautions against the spread of the disease are being or can be taken.

In diseases such as Scarlet Fever and Diphtheria the cases are removed to the Infectious Diseases Hospital whenever the parents wish, or if the circumstances are such that it is considered adequate measures of isolation cannot be adopted at home.

With regard to Enteric Fever the case is removed to the City Hospital if there be accommodation; if not, by arrangement, to one of the General Hospitals. The Council now pay for such cases.

After the removal of a case to the Hospital, or on receipt of information that a case is completely recovered and is free from infection, or in the case of death occurring, the premises are disinfected. Wearing apparel, bedding and infected clothes are removed to the disinfecting station and disinfected by means of the steam disinfecter.

The rooms are disinfected by being sprayed with a solution of disinfectant and subsequent fumigation.

INFECTIOUS DISEASES HOSPITAL.

The Hospital consists of an Administrative Block, containing Matron's Office and Sitting Room, Dining Room, Recreation Room, Dispensary, Kitchen, Scullery, 10 Bedrooms and Bathroom. There is a dwelling-house in the grounds for the Medical Superintendent.

The Hospital proper consists of an Observation Block, containing three Wards, with accommodation for three beds in each Ward, and a Ward Kitchen overlooking each Ward.

There is a Pavilion of two Wards, with 6 beds and 2 cots in each Ward, and a bathroom, w.c., and a slop-sink for each Ward placed in a building connected therewith by a cross-ventilated lobby.

A new Pavilion of a similar construction was erected and opened in March, 1919. There are two Wards and each Ward is divided into two by a glass screen. One Ward contains 7 beds for Europeans and 4 for non-Europeans; the other contains 11 beds for Europeans and 4 for non-Europeans, with 2 single bedded Wards for delirious and septic cases.

There are also two buildings of a temporary nature for the accommodation of patients suffering from Tuberculosis.

One is divided into five separate compartments with two beds in each, and is for males only. The accommodation for females consists of a Ward with an adjoining dining-room, accommodating 10 patients, allowing for 5 beds on the open stoep. This accommodation is for Capetown cases only, and for those sufferers who are likely to derive benefit from open-air treatment.

An agreement has been made with the Union Government under which are admitted, cases from the Port and cases for which the Government is liable for medical treatment. There is also an agreement with the Cape Divisional Council for the admission of cases from their area when accommodation is available.

Plans have been prepared, and approved of for additional Wards and extensions to the Hospital buildings, and the erection of same was commenced in the month of May.

TABLE XVIII.

PATIENTS ADMITTED TO AND DISCHARGED FROM THE CITY HOSPITAL FROM JULY 1ST 1922, TO JUNE 30TH, 1923, CLASSIFIED AS TO RACE AND DISEASE.

Disease.	Under Treatment, July 1st, 1922.		Admitted.		Discharged.		Died.		Under Treatment, June 30th, 1923.		Total Admitted.
	Eur.	Other	Eur.	Other.	Eur.	Other	Eur.	Other	Eur.	Other	Persons.
<i>Section A.</i>											
Scarlet Fever ..	12	1	31	7	41	8	..	..	2	..	38
Enteric Fever ..	17	6	124	106	126	85	13	18	2	9	230
Diphtheria ..	1	..	69	18	61	12	6	5	3	1	87
Puerperal Fever ..	..	..	9	10	6	7	2	2	1	1	19
Erysipelas ..	..	..	11	1	10	1	..	..	1	..	12
Tuberculosis ..	6	9	35	65	21	17	12	46	8	11	100
Anthrax ..	..	..	1	..	..	..	1	..	..	..	1
Infective Encephalitis..	..	1	..	..	..	1	..	..	..	..	..
Cerebro-Spinal Meningitis..	1	..	2	1	..	..	3	1	..	..	3
Measles ..	..	..	9	1	8	1	..	..	1	..	10
Rotheln ..	..	..	1	..	1	..	..	..	..	..	1
Pneumonia ..	1	1	16	30	13	25	3	5	1	1	46
Influenza ..	5	5	10	6	14	10	..	..	1	1	16
Malta Fever ..	..	..	..	1	..	1	..	..	..	..	1
Other Diseases ..	1	..	..	3	..	3	1	..	..	..	3
Observation ..	..	..	5	2	5	..	..	2	..	..	7
<i>Section B.</i>											
Cases not included above which were admitted for, and proved not to be ;											
Scarlet Fever ..	..	..	5	2	4	2	1	..	..	..	7
Enteric Fever ..	..	..	5	7	4	7	1	..	..	..	12
Diphtheria ..	..	..	1	4	1	4	..	..	..	..	5
Puerperal Fever ..	..	..	2	1	2	1	..	..	..	..	3
Erysipelas ..	..	..	1	3	1	2	..	..	..	1	4
Tuberculosis ..	..	..	..	2	..	1	..	1	..	..	2
Infective Encephalitis..	..	..	1	..	1	..	..	..	..	..	1
Pneumonia ..	..	..	1	..	1	..	..	..	..	..	1
Influenza ..	..	..	4	1	3	1	1	..	..	..	5
Totals ..	44	23	343	271	323	189	44	80	20	25	614

TABLE XIX.

PATIENTS ADMITTED TO AND DISCHARGED FROM THE CITY HOSPITAL FROM JULY 1ST 1922, TO JUNE 30TH, 1923, CLASSIFIED AS TO WARD, ETC., TO WHICH THEY BELONG.

Wards, etc.	Under Treatment, July 1st, 1922.		Admitted.		Discharged.		Died.		Under Treatment, June 30th, 1923.		Total Admitted.
	Eur.	Other	Eur.	Other	Eur.	Other	Eur.	Other	Eur.	Other	Persons.
1 (Sea Point) ..	3	2	28	16	27	13	4	4	..	1	44
2 (Harbour) ..	2	2	18	18	14	12	4	6	2	2	36
3 (West Central)..	3	..	7	12	8	9	..	3	2	..	19
4 (Kloof) ..	5	..	31	13	32	7	3	4	1	2	44
5 (Park) ..	7	..	16	6	20	4	2	..	1	2	22
6 (East Central)..	5	3	26	27	26	17	3	8	2	5	53
7 (Castle) ..	3	2	11	40	12	26	..	14	2	2	51
8 (Woodstock) ..	4	1	42	20	37	13	8	7	1	1	62
9 (Salt River) ..	4	1	70	31	58	20	13	6	3	6	101
10 (Mowbray) ..	1	..	19	5	18	2	1	3	1	..	24
11 (Maitland) ..	1	1	14	12	12	10	..	2	3	1	26
12 (Rondebosch) ..	2	4	11	23	10	21	2	6	1	..	34
13 (Claremont) ..	..	3	23	31	23	25	..	7	..	2	54
14 (Kalk Bay) ..	..	1	3	3	2	2	1	2	..	..	6
Vagrants ..	..	1	..	3	..	3	..	1	..	..	3
Steamers ..	1	..	16	2	15	1	1	1	1	..	18
Outside of City ..	3	2	8	9	9	4	2	6	..	1	17
Totals ..	44	23	343	271	323	189	44	80	20	25	614

With regard to the number of day units there were 20,100 (6,495 for tuberculosis patients, and 13,605 for patients suffering from diseases other than tuberculosis), producing an average of 55·07 patients per diem, as compared with 59·30 in the previous year, and 74·29 in the year 1920-1921.

Table XVIII gives the admissions, discharges and deaths, and also shows the number remaining in the City Hospital at the close of the previous year and at the close of the present period, of patients classified as to the diseases from which they were suffering and as to their race.

Table XIX gives the admissions, discharges and deaths, and also shows the number remaining in the hospital at the close of the previous year, and at the close of the year under review, of patients classified as a Race, and as to the Wards of the City from which they were removed, or, as to vagrants, cases from steamers in the Docks, and cases from outside the City's area.

During the year there were 614 admissions, amongst which, however, were 2 Europeans who were admitted twice, thus making a total of 612 persons admitted; 341 of these were Europeans and 271 non-Europeans. With regard to the dual admissions, one person was admitted twice for enteric fever and the other was admitted first for enteric fever and subsequently for tuberculosis.

There were 44 European and 80 non-European deaths, and 20 Europeans and 25 non-Europeans remaining in Hospital at the close of the year. Of the 44 Europeans and 23 non-Europeans remaining in hospital at the close of last year, 8 Europeans and 6 non-Europeans died; these 14 deaths are included in the 44 European and 80 non-European deaths mentioned above. One non-European remaining in the hospital at the close of the previous year was still in hospital at the close of the term under report. With regard to cases admitted for one disease and proved to be suffering from another disease, they are treated in the following sections, as therein stated, as cases of the disease from which they actually suffered but are included in Table C in the Appendix and in Part II ("Notification of Infectious Diseases") as cases of the disease for which they were admitted (*i.e.*, notified).

Scarlet Fever.—There were 38 patients admitted for scarlet fever during the year, and of these 31 were Europeans and 7 non-Europeans. There were no deaths and two of the Europeans remained in the hospital at the close of the year. The twelve European and one non-European cases remaining over from the previous year were all discharged during the present year.

Three of the Europeans admitted did not belong to the City; two of them being passengers removed from steamers calling at the Port, and the remaining one being a resident of the City of Johannesburg, having been in Capetown only a day or two prior to admission. One of the non-Europeans was admitted from the Cape Divisional Council's area of Maitland.

Included in the cases admitted was one European who was taken in for enteric fever, but was found to be a case of scarlet fever.

In addition to the above cases of scarlet fever, 3 Europeans and 1 non-European, admitted for that disease, were found to be suffering from measles; another European was found to be suffering from Rotheln, and one European admitted as a suspected case proved not to be suffering from scarlet fever and is shown under the heading of "Observation" in Table XVIII. This latter case came from the City of Johannesburg, being only a few days in Capetown prior to admission to hospital.

There were also 5 European and 2 non-European cases, shown in Section B of Table XVIII, which were admitted for and proved not to be scarlet fever. Amongst these was 1 European who died of pityriasis rubra. The remainder of these 7 cases were discharged before the close of the year.

Enteric Fever.—During the year there were 229 cases of enteric fever admitted to the City Hospital, 123 being Europeans and 106 non-Europeans. One of the Europeans, however, was admitted twice during the year for this disease, bringing the total admissions for enteric fever up to 230, and the European admissions up to 124 as shown in Table XVIII. Another European case admitted for enteric fever was subsequently admitted during the year under report for tuberculosis, and is dealt with as such, for the second admission, in the portion of these references concerning tuberculosis. Thirteen Europeans and 18 non-Europeans died, and 2 Europeans and 9 non-Europeans remained in the hospital at the close of the year under review. Of the 17 European and 6 non-European cases remaining in hospital at the close of the previous year, 2 Europeans died, and the remainder of these 23 cases were discharged previous to the termination of the year. These two deaths are included in the 31 deaths from enteric fever shown in Table XVIII. Three of the Europeans and 3 of the non-

Europeans did not belong to the City of Capetown. The 3 Europeans and 1 of the non-Europeans were members of the crews of steamers calling at the Port, and of these, the non-European died. The remaining 2 non-Europeans were admitted from outside the City's boundaries, one from Constantia, and the other from Parow; the latter case died. Another non-European was a vagrant. Included in the non-European admissions was one case which was found to be suffering from both enteric fever and pulmonary tuberculosis but which is shown merely as enteric fever; this case remained over at the close of the year. There was also 1 non-European who was transferred from the Rentzkie's Farm Hospital, to which institution the case had been admitted for influenza, and 2 other cases admitted to the City Hospital as cases of influenzal pneumonia.

In addition to the above cases of enteric fever admitted, there were 10 Europeans and 9 non-Europeans admitted for that disease, but who were found to be suffering from other diseases; of these, 1 European had scarlet fever, 3 Europeans and 3 non-Europeans had tuberculosis, 2 Europeans had measles, 4 Europeans and 4 non-Europeans had pneumonia, 1 non-European had influenza, and 1 non-European was suffering from Malta fever, whilst there was 1 non-European suffering from both enteric fever and tuberculosis who is merely shown as tuberculosis in Table XVIII.

There were also the 5 Europeans and 7 non-Europeans who were admitted for, and proved not to be cases of enteric fever as shown in Section B of Table XVIII. Of these 12 cases, one of the Europeans died of valvular disease of the heart, and the remaining patients were discharged prior to the close of the year; one European of these was a citizen of Johannesburg and was admitted to the hospital on his arrival in Capetown, and one non-European was a member of the crew of a steamer calling at the Port.

Diphtheria.—Concerning this disease there were 69 European cases and 18 non-European cases admitted during the year, making a total of 87. Six Europeans and 5 non-Europeans died, and 3 European cases and 1 non-European case remained in the Hospital at the close of the year. The European case remaining in Hospital at the close of the previous year was discharged during the present period. One European case was a passenger on board a steamer calling at the Port, and 2 other Europeans and 2 non-Europeans were admitted from outside the City's boundaries. Of these latter cases the Europeans were admitted from Parow and Durbanville respectively and the non-Europeans, both of whom died, from Protea and Woltemade respectively.

There was also one European case of diphtheria admitted and discharged in the previous year, who was again admitted to the Hospital during the present period as a diphtheria carrier, and is shown under the heading of "Observation" in Table XVIII for the second admission.

In addition to the cases of diphtheria, there were 1 European and 4 non-Europeans admitted for diphtheria, but who proved not to be cases, as shown in Section B of Table XVIII, all of these were discharged before the close of the year. There was also one European admitted as a suspected case of diphtheria who proved not to have the disease. This case is shown in Table XVIII under the heading of "Observation."

Puerperal Fever.—Nine European and 10 non-European cases were admitted, and of these, 2 Europeans, and 2 non-Europeans died, and 1 European and 1 non-European remained in the Hospital at the close of the year. There were no patients suffering from this disease remaining over from the previous year. One of the European cases were admitted direct from the Cape Divisional Council's area of Parow.

In addition to the foregoing there was 1 non-European admitted for puerperal fever who proved to be a case of pneumonia. There were also 2 Europeans and 1 non-European admitted for puerperal fever who proved not to be cases of that disease. These 3 last mentioned persons were all discharged and are shown in Section B of Table XVIII.

Erysipelas.—Twelve cases of this disease were admitted, 11 being Europeans and 1 a non-European. There were no deaths from this disease in the Hospital during the year, and no cases of the disease remained over from the previous year. One European remained in the Hospital at the termination of the present year. One of the Europeans was admitted from the Cape Divisional Council's area, Parow.

In addition to the above there was 1 European, who died, admitted for erysipelas who proved to be a case of Anthrax, and 1 European and 2 non-Europeans, who were discharged previous to the close of the year, admitted for erysipelas but who were found not to be cases of this disease, and another non-

European who also proved not to have erysipelas and who remained over at the close of the period under revision; these last 4 cases are shown in Section B of Table XVIII.

There were also 1 European and 1 non-European admitted as suspected cases of erysipelas who were diagnosed as cases of cellulitis and are shown under the heading of "Observation" in Table XVIII; the non-European died.

Tuberculosis.—During the year 100 cases of tuberculosis were admitted, 35 being Europeans and 65 being non-Europeans. Twelve Europeans and 46 non-Europeans died and 8 Europeans and 11 non-Europeans remained in the Hospital at the close of the year. Of the 6 European and the 9 non-European cases remaining in the Hospital at the end of the previous year, 1 non-European remained in the Hospital throughout the present period, and 4 Europeans and 6 non-Europeans died, and are included in the 58 deaths shown in Table XVIII; the remainder being discharged during the year.

Five Europeans were removed from steamers arriving at the Port, four of whom were members of the crews, and the remaining one was a passenger. One European and 4 non-Europeans were admitted from outside the Municipality; the European and one of the non-Europeans being admitted from Wynberg, one of the non-Europeans from Plumstead, another from Bellville and the remaining non-European from the Cape Divisional Council's area of Milnerton, whilst another non-European was a vagrant.

Amongst the non-European cases admitted were two native men who, besides suffering from tuberculosis, were affected with enteric fever and pneumonia respectively, but are only shown in Table XVIII as cases of tuberculosis, whilst another non-European suffering from both enteric fever and pulmonary tuberculosis is merely shown as enteric fever; this case remained over at the close of the year.

One European case admitted for tuberculosis was admitted previously during the year for enteric fever, and is also dealt with for the previous admission in the section of these references in regard to enteric fever.

One European and two non-Europeans were each admitted once to the City Hospital in a previous year.

Four Europeans and 6 non-Europeans were admitted for other diseases, 3 of the Europeans for enteric fever and the other for influenzal pneumonia, and 3 of the non-Europeans for enteric fever, 2 for epidemic cerebro-spinal meningitis (diagnosed as tubercular meningitis) and the remaining one for influenzal pneumonia.

In addition to the above cases admitted, there were two non-Europeans who were admitted for tuberculosis but who were found not to be suffering from that disease as shown in Section B of Table XVIII. One of these died of emphysema of lungs and the other non-European was a vagrant who was transferred to the Old Somerset Hospital.

Anthrax.—One European was admitted suffering from anthrax and died. This case was admitted as one of erysipelas. No cases were admitted in the previous year.

Infective Encephalitis.—There were no cases of this disease admitted. The non-European remaining in the Hospital at the end of the previous year was discharged in the year under revision. There was one European admitted as a case of encephalitis lethargica who was found on diagnosis not to be a case of that disease, and was discharged before the close of the year. This latter case is shown in Section B of Table XVIII.

Epidemic Cerebro-Spinal Meningitis.—Three cases were admitted for this disease, two being Europeans and one a non-European: these three cases together with the European case remaining in Hospital from the previous year, died during the present period.

In addition to the above cases admitted there were two non-Europeans admitted for the disease, but who proved to be cases of tubercular meningitis, whilst there were one European and one non-European admitted as suspected cases of the disease, but who were found not to be cases of cerebro-spinal meningitis. The non-European died of gastro enteritis. These two cases are shown under "Observation" in Table XVIII.

Measles.—Nine Europeans and one non-European were admitted suffering from measles. One of the Europeans remained in the Hospital at the close of the year; the others were all discharged. There were no cases under treatment at the close of the previous period. Two of the European cases were passengers removed from steamers calling at the Port.

Two of the European cases were admitted for enteric fever, and 3 other Europeans and 1 non-European were admitted for scarlet fever.

Rötheln or German Measles.—One European case was admitted, and the same was taken in as a case of scarlet fever, but on diagnosis was found to be suffering from rötheln and discharged during the period under review. At the close of the preceding year there were no cases of German measles under treatment in the City Hospital.

Pneumonia.—Forty-six cases of pneumonia were admitted, 16 of these being Europeans and 30 being non-Europeans. There were 3 European and 5 non-European deaths in the Hospital due to pneumonia, and 1 European and 1 non-European case of the disease remained in the Hospital at the termination of the year under report. The European case and the non-European case remaining in the Hospital from the previous year were discharged in the present period.

In addition to the foregoing cases admitted, there was one Native male who was admitted suffering from both pneumonia and tuberculosis, but who is merely shown in Table XVIII as a case of tuberculosis.

Four of the European cases and 4 of the non-European cases of pneumonia were admitted for enteric fever and another non-European case of pneumonia was admitted for puerperal fever.

Besides the above mentioned, there were 1 European and 3 non-Europeans admitted as cases of influenzal pneumonia who were diagnosed as suffering from other diseases; the European and one of the non-Europeans from pulmonary tuberculosis and the other 2 non-Europeans from enteric fever. There was also one European admitted for influenzal pneumonia but who was not suffering from that disease, and is shown in Section B of Table XVIII.

Influenza.—There were 16 cases of this disease admitted and of these, 10 were Europeans and 6 were non-Europeans. One European and 1 non-European remained in the Hospital at the termination of the year. The 10 cases remaining over from the previous year were discharged during the present period. There were no deaths. One of the non-Europeans was admitted as a case of enteric fever, but was diagnosed as a case of influenza.

Not included in the above are 4 Europeans and 1 non-European who were admitted for influenza, but were not suffering from that disease, as shown in Section B of Table XVIII.

One of these Europeans died of malignant endocarditis and the three remaining Europeans were members of the crew of a Norwegian steamer which called at the Port. None of these remained in Hospital at the close of the period.

There was also one European admitted for influenza, but who was found to be a case of pulmonary tuberculosis, and a non-European admitted to Rentzkie's Farm Hospital as a case of influenza, who proved to be suffering from enteric fever, and was transferred from the above mentioned institution to the City Hospital.

Malta Fever.—There were no cases remaining over from the previous year. One non-European case was admitted and discharged during the present period. This case was admitted for enteric fever, but on diagnosis was found to be a case of Malta fever.

Other Diseases.—Three non-Europeans are shown in Table XVIII under this heading; one was a case of tetanus and the other two were cases of scabies. These were all discharged prior to the end of the year. The European case which remained in the Hospital from the previous period died, and was one of meningitis.

Observation.—Concerning cases remaining over from the previous year, there were none. Four Europeans and two non-Europeans were admitted under this heading as suspected cases, but who proved not to be suffering from the diseases suspected. There was also one European admitted as a diphtheria carrier who had previously been treated in the Hospital during the previous period for diphtheria. Of the 4 Europeans and 2 non-Europeans above specified, 1 European was admitted as a suspected case of scarlet fever, 1 European as a diphtheria suspect, another as an erysipelas suspect, and the remaining European is a suspected case of epidemic-cerebral spinal meningitis. All 5 Europeans were discharged prior to the end of the year. Regarding the above two non-Europeans, one was admitted as a suspected case of erysipelas, and the other as a suspected case of epidemic cerebro-spinal meningitis. Both these cases died during the period under report: the former of cellulitis and the latter of gastro-enteritis.

SMALL POX HOSPITAL.

This Hospital, which is situated at Rentzkie's Farm in Ward 11 (Maitland), is intended for the isolation of small pox occurring within the City of Capetown, the Municipalities of Wynberg and Simonstown, the area of the Cape Divisional

Council, and the Port of Table Bay, and is also to be used for any cases of plague and typhus fever which occur in these areas.

There were 8 cases admitted to this Hospital during the year, all being males; and of these, 1 was a European and the remaining 7 were non-Europeans, amongst whom were 4 Natives. All these cases, together with the 2 non-Europeans and 3 Natives remaining in the Hospital from the previous year, were discharged during the year under report.

Enteric Fever.—One non-European and one Native were admitted suffering from this disease. The non-European was a resident of Ward 12 (Rondebosch), and was sent in for influenza, but proved to be a case of enteric fever, and transferred to the City Hospital. The Native was admitted from the N'dabeni Location, which is just outside the Municipal boundary, and was sent in as a suspected case of typhus, but was found on diagnosis to be suffering from enteric fever.

Typhus Fever.—Two cases of this disease were admitted, one being a European from Ward 11 (Maitland), and the other a Native from the N'dabeni Location.

Influenza and Pneumonia.—Two non-Europeans were admitted, one from Ward 10 (Mowbray), and the other from Ward 12 (Rondebosch).

There were in addition to the above, 2 non-Europeans and 2 Natives treated in the Hospital who remained over from the preceding year. These cases were enumerated in the previous report.

Syphilis.—Two Natives were admitted suffering from this disease; one from Ward 4 (Kloof), and the other from the N'dabeni Location. The former was sent in as a suspected case of small-pox, and the latter as a suspected case of plague, but on diagnosis proved to be cases of syphilis.

Chicken-pox.—A Native case of chicken-pox (admitted as a suspected case of small-pox) was treated in the Hospital, having remained over from last year. This case was enumerated in the previous report.

PART IV.

WORK OF THE FEMALE SANITARY INSPECTORS, AND OF THE INFANT LIFE AND TUBERCULOSIS BUREAUX AND MUNICIPAL TREATMENT CENTRE (VENEREAL CLINIC).

PORTION DEALING WITH WORK OF INSPECTRESSES AND CHILD WELFARE.

(PREPARED BY DR. MARY VAN INGEN).

During the year 1922-1923 the Staff consisted of 10 Sanitary Inspectresses and a Chief Sanitary Inspectress, who have worked under the direction of the Lady Medical Assistant to the Medical Officer of Health. The work has been carried on on similar lines to those of the preceding year.

The duties of the Sanitary Inspectresses include visits to houses where births have occurred; investigations into the deaths of children under five years; periodical visits to notified cases of tuberculosis; investigations into certain cases of infectious disease, such as measles and whooping cough, and also to cases of ophthalmia neonatorum with a view to obtaining prompt and adequate treatment.

During the early part of the year under review a mild epidemic of influenza occurred, and 4,798 visits were paid to houses with a view to ascertaining where such cases existed and affording help where necessary; during the latter part of this period whooping cough and measles have been prevalent; cases have been notified to the Department from the various schools in the Peninsula; and the Inspectresses have paid visits to the houses wherever such cases were known to exist.

The Inspectresses inspect the work of practising midwives, and inquire into cases of puerperal fever; they also inquire into indigent cases of confinement where fees are due to medical practitioners according to an arrangement made by the Council.

The Sanitary Inspectresses attend at the various Infant Welfare Bureaux established in different parts of the Peninsula; each Inspectress being responsible for the arrangements of the Bureau in her district; two attend at the Tuberculosis

Bureaux held at the Public Health Department on Friday afternoons, and several at the Female Venereal Clinic held at 46, Keerom Street, on Tuesday and Friday afternoons and Wednesday mornings.

Cases of illness and poverty discovered in their districts by the Sanitary Inspectresses are reported to the Lady Medical Assistant to the Medical Officer of Health and referred to Hospitals, Free Dispensary, Convalescent Homes or various charitable agencies as required.

A certain amount of social work is done, of necessity, in connection with cases which are brought to the notice of this Department. Mentally deficient girls, who have been in immoral surroundings, have, with the help of The Society for Mental Hygiene, been certified and appropriately placed; the Department has collaborated with various agencies for Preventive and Rescue Work, and, to a small extent, with the Inspectorate of Factories, and agencies for dealing with the unemployed.

Sanitary defects discovered during routine visits of the Inspectresses are reported to the Chief Sanitary Inspector for investigation.

The following Table shows the number of visits paid by the Sanitary Inspectresses during the period under review, and in previous years:—

TABLE XX.

Number of visits paid by the Sanitary Inspectresses for the Present and two Previous Years.

Description of Visits, Classified.	Number of Visits.		
	1922-1923.	1921-1922.	1920-1921.
Visits to Houses where Births have occurred ..	6,938	6,604	6,202
Visits to Houses where Deaths under 5 years of age have occurred	1,296	1,056	1,753
Additional Visits to Houses where Births have occurred	17,178	13,109	5,120
Visits to cases of Tuberculosis	2,035	1,223	3,108
Visits <i>re</i> cases of Puerperal Fever	41	31	44
Visits <i>re</i> Measles	75	..	125
Visits <i>re</i> Mumps .. .. .	..	1	..
Visits <i>re</i> Whooping Cough	41	2	22
Visits <i>re</i> Enteric Fever .. .. .	..	1	16
Visits <i>re</i> Diphtheria .. .. .	..	..	..
Visits <i>re</i> Erysipelas .. .. .	..	..	..
Visits <i>re</i> Scarlet Fever	3	1	1
Visits <i>re</i> Leprosy .. .. .	..	..	2
Visits <i>re</i> Chicken Pox	2	1	5
Visits <i>re</i> Ophthalmia Neonatorum	64	151	39
Visits <i>re</i> Pneumonia	7	..	6
Visits <i>re</i> Midwives	429	494	355
Visits to Schools	7	..	2
Visits to Workshops where females are employed	1	7	3
House to House and other visits <i>re</i> Influenza ..	4,853	1,367	1,946
Other Houses Inspected	450	..	..
Various Visits	403	654	832
Total Visits	33,823	24,702	19,581
Complaints referred to Chief Sanitary Inspector	67	137	75

NOTIFICATION OF BIRTHS.

The regulations *re* Early Notification of Births established in December, 1920, have been in operation since that date, and form the basis of the Sanitary Inspectresses' work amongst infants and young children. The amount of work done under this heading has multiplied each year, as it is proposed to keep the children visited under observation for the first five years of life. Records of each child are kept in the Department in the care of a clerk who is principally occupied with this work.

These regulations, framed under Section 133 (1) of the Public Health Act, No. 36 of 1919, and promulgated under Government Order No. 1058, dated June 18th, 1920, provide:—

(1) In respect of every child born after the completion of the sixth month of pregnancy, whether alive or dead, within the Municipality, it shall be the duty of the father of the child if he be residing with the mother when the child is born, or, in his absence, the person attending on the mother at the time of or within six hours after the birth, to furnish forthwith either verbally or in writing to the Medical Officer of Health the following particulars:—

- (a) Name, age, and race of mother.
- (b) Name of father.
- (c) Date and time of birth.
- (d) Place where the birth occurred and present address of mother.
- (e) Permanent address of mother.
- (f) Number of confinement (first, second, etc.).
- (g) Whether the child was born alive, and was alive at time of reporting.
- (h) Name of medical practitioner, midwife or other person who was in attendance.
- (i) Name and address of informant.

(2) The foregoing particulars shall, if reported verbally, be furnished to the Medical Officer of Health at his office or otherwise at such place as may be notified by advertisement, *within twenty-four hours of the birth*, or where a Sunday or public holiday intervenes, on the next succeeding day.

(3) If furnished through the post, the notification *must be posted within twenty-four hours of the birth*. The Council shall supply, on application and free of charge, to any medical practitioner or midwife residing or practising in the Municipality, stamped and addressed letter-cards containing the form of notification.

(4) The notification required to be made under these regulations shall be in addition to and not in substitution for the requirements of any law relating to the registration of births, and any registrar of births and deaths, or any person duly authorised thereto by such registrar shall, at all reasonable times, have access to notices of births received by a medical officer of health under these regulations, or to any book in which those notices may be recorded.

(5) Any person failing to comply with any provision of these regulations shall be liable on conviction to a fine not exceeding twenty-five pounds (£25).

To facilitate the carrying out of these regulations prepared letter-cards, addressed to the Medical Officer of Health, 12, Keerom Street, Capetown, are supplied to each midwife in the City, and on application at the Public Health Department.

During the period under review 7,088 births were notified:—

Notified by Midwives and Nurses	6,337
„ Parents and Others	740
„ Doctors	11

BUREAUX.

The work of the Infant Consultation Bureaux has continued to increase.

Five Bureaux for Infant Consultations are in operation, and at each a consultation is held weekly by the Lady Medical Assistant to the Medical Officer of Health, with the assistance of the Sanitary Inspectress of the district. Voluntary workers also give their help at these weekly consultations.

The hours of consultation at each Bureau are as follows:—

Mondays ..	2-5 p.m. ..	Claremont Town Hall	European & Coloured.
Tuesdays ..	10 a.m.-12 Noon	3, Milner Road, Woodstock	Coloured.
Tuesdays ..	10 a.m.-12 Noon	West London	European & Coloured.
Wednesdays	2-5 p.m.	Health Department, 12, Keerom Street, Cape Town	Coloured.
Thursdays ..	10 a.m.-12 Noon	Maitland Town Hall, Maitland	European & Coloured.
Thursdays ..	2-5 p.m. ..	3, Milner Road, Woodstock	European.
Fridays ..	2-3 p.m. ..	Health Department, 12, Keerom Street, Cape Town	European.

The number of Attendances at the Bureaux are shown below: -

				1922-1923.	1921-1922.
Cape Town	..	..	..	4,910	4,951
Maitland	..	..	..	1,422	1,835
Woodstock	..	..	..	4,549	4,061
West London	..	..	..	1,535	1,281
Claremont	..	..	..	3,407	2,969
Totals				15,823	15,097

The following Table shows the number of attendances at the Bureaux for each month classified as to Race:—

TABLE XXI.

ATTENDANCES OF INFANTS AND YOUNG CHILDREN, FOR CONSULTATION, AT THE BUREAUX.

1922 1923.			12 Keerom St.		Maitland Town Hall.		Woodstock		West London.		Claremont Town Hall.		Totals.	
			New Cases.	Total Attend- ances.	New Cases.	Total Attend- ances.	New Cases.	Total Attend- ances.	New Cases.	Total Attend- ances.	New Cases.	Total Attend- ances.	New Cases.	Total Attend- ances.
1922.														
July ..	E.		6	98	5	67	28	263	2	4	9	62	50	494
	O.		50	335	32	108	22	142	23	151	20	271	147	1,007
August ..	E.		10	80	2	42	6	195	..	3	7	46	25	366
	O.		43	278	17	70	14	120	13	103	17	220	104	791
September ..	E.		7	94	5	62	17	181	2	2	8	49	39	388
	O.		43	293	18	61	22	135	14	88	33	264	130	841
October ..	E.		6	91	9	49	35	288	2	4	5	33	57	465
	O.		38	351	34	106	34	183	32	159	33	245	171	1,044
November ..	E.		5	100	9	34	18	229	3	9	6	22	41	394
	O.		52	341	17	77	20	196	21	132	23	216	133	962
December ..	E.		4	116	4	26	12	240	1	13	14	56	35	451
	O.		35	409	17	85	14	203	21	115	29	277	116	1,089
1923. January	E.		10	115	6	39	23	262	..	5	4	27	43	448
	O.		51	372	27	110	20	171	19	137	51	268	168	1,058
February ..	E.		7	109	4	47	14	207	2	6	7	26	34	395
	O.		29	283	16	81	34	186	16	112	19	212	114	874
March ..	E.		6	104	4	24	12	224	3	12	7	34	32	398
	O.		35	297	13	67	12	158	17	109	34	272	111	903
April ..	E.		11	116	5	31	10	264	1	14	3	35	30	460
	O.		42	335	9	82	22	190	16	107	30	300	119	1,014
May ..	E.		3	70	2	13	3	112	2	8	..	19	10	222
	O.		22	226	14	36	8	113	21	115	21	220	86	710
June ..	E.		8	69	6	29	11	186	2	8	1	15	28	307
	O.		27	228	24	76	9	101	18	119	16	218	94	742
Total	E.		83	1,162	61	463	189	2,651	20	88	71	424	424	4,788
	O.		467	3,748	238	959	231	1,898	231	1,447	326	2,983	1,493	11,035

Mothers of various classes attend and appreciate the work of the Bureaux, which is intended to be mainly educational in nature.

Minor ailments are treated at the Bureaux and more serious cases referred to private Doctors, or arrangements made for their admission to Hospital.

The aim of the Consultation is to produce and maintain healthy babies, and keep them under observation until they attain school age.

In certain cases of young infants who cannot be breast-fed, dried milk is supplied at cost price, under the Medical Officer's directions, to those mothers who cannot afford to purchase from retail dealers; sometimes this is supplied free. During the year 493 babies have been supplied with dried milk and 6,186 lbs. have been used for the purpose.

A fund for supplying fresh milk at reduced cost is also administered by the Medical Officer at the Bureaux. This fund is provided by the Child Life Protection Society, and is a very great help for those infants and older children for whom the Medical Officer considers fresh milk the most suitable food.

During the year £468 0s. 11d. was the amount spent by the Society in the purchase of milk, and £111 10s. 6d. was contributed by the mothers towards this expenditure. The services of the voluntary workers who attended these centres have proved at all times of great value, and many thanks are due to those ladies for their faithful attendance and assistance.

Ante-Natal Work.—Some valuable ante-natal work has been done at the Female Clinic for the Treatment of Venereal Disease, and is referred to under the section for Venereal Disease.

In order to encourage and enable poor mothers to breast-feed their infants free dinners are provided at two of the centres: the Health Department, 12, Keerom Street, Capetown Proper, and 3, Milner Road, Woodstock, for Nursing and Expectant Mothers, who are in need of nourishing food. The dinners have been particularly useful during the period of poverty and unemployment through which we have been passing.

TABLE XXII.

ATTENDANCES AT THE DINNERS FOR NURSING AND EXPECTANT MOTHERS AT THE CAPETOWN PROPER AND WOODSTOCK BUREAUX FOR THE YEARS 1922-1923, 1921-1922.

Month.	Year 1922—1923.				Year 1921—1922.			
	Bureau at the Public Health Department, No. 12, Keerom St., Capetown.		Bureau at No. 3 Milner Road, Woodstock.		Bureau at the Public Health Department, No. 12, Keerom St., Capetown.		Bureau at No. 3 Milner Rd., Woodstock.	
	Eurs.	Others.	Eurs.	Others.	Eurs.	Others.	Eurs.	Others.
		19 22				19 21		
July	26	290	35	345	63	348	Nil	218
August	Nil	235	11	199	30	272	16	162
September	Nil	272	10	232	10	148	82	128
October	Nil	306	Nil	272	Nil	304	44	183
November	Nil	272	Nil	383	40	221	15	63
December	12	272	Nil	322	38	186	8	104
		19 23				19 22		
January	37	243	Nil	280	27	157	42	121
February	40	240	5	191	83	331	23	196
March	20	220	Nil	186	77	127	2	212
April	20	301	Nil	247	90	172	2	263
May	14	219	Nil	129	44	196	14	181
June	4	235	5	174	19	228	Nil	191
Year	173	3,105	66	2,960	521	2,690	248	2,022

DAY NURSERY.

The Day Nursery, which is conducted at 118, 120 and 122, Aspeling Street, Capetown Proper, for the convenience of those mothers who are obliged to earn their own living, has continued its work.

The Nursery is under the supervision of a Resident European Matron, who is a trained Nurse. The demand for the advantages offered by the Nursery is, however, a little disappointing.

TABLE XXIII.

Daily Attendances of Paying and Free Children at the Day Nursery, Aspelng Street, Capetown Proper.

For the period 1st July, 1922 to 30th June, 1923:—

MONTH	ATTENDANCES,			AMOUNT PAID.
	Paying @ 4d. per diem.	Free.	Total.	
1922.				£ s. d.
July	271	30	301	4 10 4
August	185	23	208	3 1 8
September	214	44	258	3 11 4
October	219	36	255	3 13 0
November	193	29	222	3 4 4
December	196	27	223	3 5 4
1923.				
January	194	48	242	3 4 8
February	180	24	204	3 0 0
March	162	24	186	2 14 0
April	209	58	267	3 9 8
May	138	42	180	2 6 0
June	167	24	191	2 15 8
Year	2,328	409	2,737	38 16 0

TUBERCULOSIS BUREAU.

(Prepared by DR. W. P. COONEY).

In general, no alteration has been made in the method, hitherto in force, of conducting the Tuberculosis Bureau.

As is frequently noticed at such a Clinic, patients do not, as a rule, come for advice until the Disease has advanced to the Second Stage. A number come for the first time when treatment is of no avail, and immediate admission to Hospital is the only resource.

It is an advantage that the Medical Officer in charge of the City Hospital should also be in control of the Tuberculosis Bureau. Under this arrangement it is anticipated that cases will be more readily kept under observation.

Tuberculin is administered to the majority of patients attending: better results would be secured with more regular attendance, as, doubtless, this form of treatment improves the condition of those who receive it regularly and judiciously.

Patients are now being classified according to their symptoms and physical condition. A few who have attended the Bureau for a number of years are now apparently cured, and need come only periodically for observation. Tuberculin treatment has been discontinued in these instances with no untoward results.

A Sanatorium is required to cope with Tuberculosis. Public interest has been aroused by the Press in regard to helio-therapy, etc., in the treatment of Tuberculosis, and there are neither sufficient beds nor adequate appliances to deal with the disease at the City Hospital, which exists primarily for the treatment and isolation of the Infectious Fevers.

It is hoped, however, that it will be found possible to set apart one of the new Wards in the Hospital for use as a small local Sanatorium, pending the provision of other accommodation. Many cases will be unfit or unwilling to travel to the new Sanatorium at Nelspoort, on account of its distance from Capetown.

During the year there were 1,238 attendances at the Bureau as compared with 1,034 in the previous year:—

Race.	Year 1922-1923.		Year 1921-1922.	
	Males.	Females.	Males.	Females.
European	209	68	191	104
Other	374	587	326	413
Persons	583	655	517	517
	1,238		1,034	

TREATMENT OF VENEREAL DISEASES.

The work of Municipal Treatment Centre at 46, Keerom Street, was continued during the year. Clinics for male patients were held by Dr. Cooney, on Mondays, Tuesdays and Wednesdays at 5 p.m., and Thursdays at 2 p.m., and for female patients by Dr. van Ingen, with the assistance of Dr. Alice Winter, on Tuesdays and Fridays at 2 p.m., and Wednesdays at 10 a.m.

It has been decided to transfer the Keerom Street clinic to the City Hospital, Portswood Road, and to place both the male and female clinics under Dr. Cooney. Beds for Venereal cases are to be provided at the hospital. A new clinic is also to be opened at Salt River, at the premises of the old Free Dispensary.

The new arrangements had not been brought into operation by the end of the year under review.

Venereal disease cases have been referred from the clinics and given in-patient treatment at the New Somerset Hospital at a cost to the City Council of 7s. 6d. per day, per patient. Sixteen were admitted to the hospital on this arrangement during the year ended 30th June, 1923. The total number of patient-days paid for being 650.

MUNICIPAL TREATMENT CENTRE (MALE DEPARTMENT).

(Prepared by DR. W. P. COONEY).

Although there has been a slight diminution in the number of new cases registered at the Venereal Diseases Clinic during the past year, this fact cannot, unfortunately, be regarded as an indication that the present anti-Venereal measures are successful. Any definite progress in this direction will, no doubt, show a temporary increase in the number of new cases, according as members of the public become aware of the serious nature and consequences of the disease, and voluntarily come to seek treatment and advice.

The extent to which Venereal Disease prevails in Capetown might be indicated by numerous examples, of which two are given.

In one authentic instance during the past eighteen months, three servants out of five, employed at different times in one household, were known to be suffering from Syphilis—one being in an infectious state.

In one public Institution four members of the Staff were sufferers. Two of these were concerned with food preparation, and one was infectious.

It can readily be seen what a danger this presents to the average citizen. Happily, only one possible case of accidentally acquired Syphilis has been noticed in the past year.

Some of the causes responsible for this state of affairs are the want of proper homes and lack of education. Dependent on the latter is the almost complete abeyance of moral sense to be observed in a number of patients attending the Clinic. Such men have no compunction about passing on Venereal Disease to another. Illegitimacy and co-habitation are not regarded as abnormal. In one class of the community 26 per cent. of the births in the past year were illegitimate.

Possibly one of the greatest dangers, so far as the spread of Venereal Disease is concerned, is the existence of a large floating population of the casual type. Men of this class sleep in the open, and cannot be induced to attend for proper treatment. One man of this type does more harm in disseminating disease than five others who have permanent homes and regular employment.

The question of segregation of natives is a vexed one, but there can be little doubt that, if natives are encouraged to migrate to the towns for economic reasons, they should be adequately provided for, and subjected to proper supervision. Town life, admittedly, exercises a deleterious influence on the native population. Indirectly, they tend to debase the coloured labourer by creating unemployment for him, and they lower his standard of living by association with him.

It is again urged that treatment centres should be established in the locations.

As pointed out last year, instruction in the dangers of Venereal Disease does not reach the people who must need it. Suitably trained coloured and native visitors would, probably, do an immense amount of good in this direction. Lectures on this subject in Afrikaans, in small halls situated in the populous districts, would, no doubt, be more productive of good than lectures in English to a select few in the centre of the City.

It is a matter for congratulation that an additional Clinic will shortly be opened at Salt River, also that provision is being made for Hospital accommoda-

tion for those who require it. The latter is very important from the point of view of ante-natal treatment. It is, comparatively, an easy matter to ensure that a syphilitic woman shall give birth to a healthy infant. It is extremely difficult to cure a child suffering from congenital disease.

In many cases during the past year results of treatment have been discouraging, owing to irregularity of attendance and re-infection. One definite case of re-infection with Syphilis was noted.

Owing to a shortage of Arsenical preparations for a time, it was found necessary to greatly modify the usual course of treatment. Smaller doses of the drug were administered, with consequent loss of efficiency. There is no doubt that small doses of Arsenical drugs light up latent disease, and leave a patient, frequently, in a precarious condition. It is quite evident that intensive treatment for the variable periods during which many patients attend is the most satisfactory line of procedure to adopt in treatment at a Clinic.

Indulgence in Alcohol is a factor that seriously militates against success in treating a number of men, and in some cases Dagga and Opium were indulged in with ill effects. The ease with which Alcohol in various forms can be obtained in illicit drinking dens may be demonstrated by the number of drunken natives that can be seen on Sunday evenings.

A few cases of Arsenical poisoning were observed in the course of the year. All these cases recovered, two being admitted to Hospital. One case of acute mercurialism occurred, following the injection of three grains of Mercury in the form of Grey Oil. He also made a complete recovery.

TABLE XXIV.

MALE SECTION.

Showing number of Attendances and Patients treated at the Municipal Treatment Centre (Venereal Clinic), classified as to Race and Month and as to New Cases arranged in Diseases, together with the Intravenous and Intramuscular Injections and Wassermann Reactions. From 1st July, 1922, to 30th June, 1923.

Month.	Race.	Total Attendances during month.	Total Patients during Month.	Total Attending each Month.	New Cases.				Intravenous Injections.	Intramuscular Injections.	Wassermann Reactions.
					Diseases from which Patients suffered.						
					Syphilis.	Gonorrhoea.	Syphilis and Gonorrhoea, Patients with both Diseases.	Non-Venereal Diseases.			
1922. July ..	E.	608	174	25	9	14	1	1	171	132	26
	Non-E.	308	109	32	22	10	..	..	145	89	11
	Total	916	283	57	31	24	1	1	316	221	37
August ..	E.	697	193	53	26	22	4	1	161	92	19
	Non-E.	299	90	21	9	12	..	..	115	66	6
	Total	996	283	74	35	34	4	1	276	158	25
September	E.	659	183	32	14	17	1	..	169	130	26
	Non-E.	287	86	18	7	8	2	1	91	78	24
	Total	946	269	50	21	25	3	1	260	208	50
October ..	E.	626	176	28	11	14	3	..	196	168	29
	Non-E.	253	88	29	18	8	2	1	106	87	21
	Total	879	264	57	29	22	5	1	302	255	50
November	E.	739	182	37	16	18	3	..	158	138	54
	Non-E.	282	93	27	15	9	2	1	109	86	17
	Total	1,021	275	64	31	27	5	1	267	224	71

Month.	Race.	Total Attendances during month.	Total Patients during month.	Total Attending each month.	New Cases.				Intravenous Injections.	Intramuscular Injections.	Wassermann Reactions.
					Diseases from which Patients suffered.						
					Syphilis.	Gonorrhoea.	Syphilis and Gonorrhoea. Patients with both Diseases.	Non-Venereal Diseases.			
December	E,	567	163	29	12	15	..	2	115	83	31
	Non-E.	260	94	23	8	12	1	2	91	75	13
	Total	827	257	52	20	27	1	4	206	158	44
1923. January ..	E.	605	160	42	16	21	3	2	126	100	28
	Non-E.	409	112	45	21	20	1	3	76	59	32
	Total	1,014	272	87	37	41	4	5	202	159	60
February..	E,	579	147	32	14	14	3	1	127	96	24
	Non-E.	344	100	28	14	9	3	2	97	75	22
	Total	923	247	60	28	23	6	3	224	171	46
March ..	E.	746	180	37	18	19	..	..	145	93	40
	Non-E.	393	105	38	23	13	2	..	86	65	21
	Total	1,139	285	75	41	32	2	..	231	158	61
April ..	E.	516	154	22	7	12	1	2	127	97	27
	Non-E.	355	112	40	31	7	2	..	108	58	27
	Total	871	266	62	38	19	3	2	235	155	54
May ..	E.	505	162	30	12	16	1	1	146	111	31
	Non-E.	399	111	30	19	8	3	..	123	109	23
	Total	904	273	60	31	24	4	1	269	220	54
June ..	E.	535	155	28	13	14	..	1	170	125	38
	Non-E.	391	118	38	22	13	2	1	106	96	30
	Total	926	273	66	35	27	2	2	276	221	68
Year. ..	E.	7,382	2,029	395	168	196	20	11	1,811	1,365	373
	Non-E.	3,980	1,218	369	209	129	20	11	1,253	943	247
	Total	11,362	3,247	764	377	325	40	22	3,064	2,308	620

MUNICIPAL TREATMENT CENTRE (FEMALE DEPARTMENT).

(Prepared by DR. MARY VAN INGEN).

The Municipal Treatment Centre established at 46, Keerom Street, Capetown Proper, in August, 1920, has continued to be popular and the work has increased.

The female clinic, which during the year was held on two afternoons a week, is now holding three sessions a week owing to increase in the number of attendances: the days and hours are Tuesdays and Fridays, 2—5 p.m., and Wednesdays, 10—12 noon. The Clinic is under the care of the Lady Medical Assistant to the Medical Officer of Health who is assisted by Dr. Alice Winter. A Table showing the number of attendances of female patients and children classified as to race and disease is given below.

Some useful ante-natal work has been done in the case of pregnant women suffering from syphilis. Sixty-four pregnant women were treated in the period under review, and of these thirty-two produced healthy infants showing no signs

of congenital syphilis; twenty-six received treatment to a varying degree, but the results on the infants are not known owing to the patients having ceased to attend before the birth of the child; one infant was born with spina bifida and died at 17 days; the remaining 5 cases resulted either in still-births or infants later developing congenital syphilis, and may be ascribed to insufficient treatment during pregnancy: 3 out of the 5 mothers came for treatment during the last month of pregnancy.

TABLE XXV.

FEMALE SECTION.

Showing number of Attendances and Patients (Female Patients and children) treated at the Municipal Treatment Centre (Venereal Clinic), classified as to Race and Month and as to New Cases arranged in Diseases, together with the Intravenous and Intramuscular Injections and Wasserman's Reactions. From 1st July, 1922, to 30th June, 1923.

Month.	Race	Total Attendances during Month.	Total Patients during Month.	Total Attending each Month.	New Cases.					Intravenous Injections.	Intramuscular Injections.	Wasserman's Reactions.
					Diseases from which patients suffered.							
					Syphilis.	Congenital Syphilis.	Gonorrhoea.	Syphilis and Gonorrhoea. (Patients with both diseases).	Non-Venereal Diseases.			
1922. July ..	E.	..	47	10	6	1	..	..	3	51	..	15
	Non-E.	..	109	35	21	8	..	..	6	106	2	30
	Total	303	156	45	27	9	..	..	9	157	2	45
August..	E.	..	48	8	5	..	1	..	2	66	..	19
	Non-E.	..	104	34	24	6	3	..	1	136	2	35
	Total	350	152	42	29	6	4	..	3	202	2	54
September	E.	..	34	7	2	1	..	..	4	37	..	8
	Non-E.	..	133	45	31	7	3	..	4	181	3	46
	Total	410	167	52	33	8	3	..	8	218	3	54
October	E.	111	44	12	8	1	..	..	3	72	..	13
	Non-E.	253	135	50	36	12	1	..	1	163	3	42
	Total	364	179	62	44	13	1	..	4	235	3	55
November	E.	143	49	8	6	2	..	..	..	78	1	30
	Non-E.	262	121	36	23	6	1	..	6	149	5	26
	Total	405	170	44	29	8	1	..	6	227	6	56
December	E.	125	44	8	3	2	..	..	3	73	1	20
	Non-E.	186	95	22	15	4	..	..	3	99	8	21
	Total	311	139	30	18	6	..	..	6	172	9	41
1923. January	E.	159	58	5	4	1	..	..	..	87	1	28
	Non-E.	178	79	10	8	2	..	..	..	95	1	24
	Total	337	137	15	12	3	..	..	..	182	2	52
February	E.	93	44	8	5	2	1	..	..	47	..	14
	Non-E.	236	101	42	27	13	1	..	1	116	..	46
	Total	329	145	50	32	15	2	..	1	163	..	60
March ..	E.	64	35	4	1	1	..	..	2	45	..	10
	Non-E.	273	113	49	26	12	..	..	11	128	..	35
	Total	337	148	53	27	13	..	..	13	173	..	45
April ..	E.	93	33	4	3	..	1	..	..	53	..	14
	Non-E.	229	98	32	26	5	1	..	..	123	5	27
	Total	322	131	36	29	5	2	..	..	176	5	41
May ..	E.	154	44	6	3	1	1	1	..	54	1	15
	Non-E.	160	100	30	23	6	..	..	1	114	5	31
	Total	314	144	36	26	7	1	1	1	168	6	46
June ..	E.	106	40	1	..	..	..	..	1	75	..	16
	Non-E.	197	104	35	29	3	1	..	2	116	3	19
	Total	303	144	36	29	3	1	..	3	191	3	35
Year ..	E.	..	520	81	46	12	4	1	18	738	4	202
	Non-E.	..	1,292	420	289	84	11	..	36	1,526	37	382
	Total	4,085	1,812	501	335	96	15	1	54	2,264	41	584

PART V.

GENERAL.

WATER SUPPLY.

The various supplies of water to the different parts of the City are as follows:—

1. From the catchment area on Table Mountain, supplying chiefly the Sea Point and Green Point and Central Wards. This water is collected in two reservoirs, Woodhead (219,600,000 gallons), and Hely-Hutchinson (203,500,000 gallons). The Kloof Nek reservoir (3,000,000 gallons) is filled from these, and is used as a service reservoir for the higher levels of the town.
2. Water from springs on the face of Table Mountain and the Platte Klip Stream collected in the Molteno Reservoir (41,370,000 gallons) and the lower reservoirs (13,322,000 gallons). These reservoirs are also fed from the Woodhead Reservoir on Table Mountain, and Steenbras Reservoir.
3. Water from the catchment area on the easterly side of Table Mountain, which is collected in the Newlands Storage Reservoir (30,000,000 gallons); also a service reservoir holding 705,000 gallons.
4. From a catchment area on the Tokai Mountains, collected in a reservoir known as the Muizenberg Storage Reservoir (18,000,000 gallons). This supplies Muizenberg, St. James, and Kalk Bay. There is a service reservoir with a capacity of 96,000 gallons in connection with this water supply.
5. The Steenbras Reservoir opened in March of 1921 (784,000,000 gallons) supplying the low level areas of Capetown and Suburbs.

The total storage capacity of the reservoirs belonging to the City is, 1,313,593,000 gallons.

The mains conveying the water from sources Nos. 1, 2 and 3 are linked up with the mains charged with the water from No. 4 source.

Owing to deficient rainfall the supply of water was restricted from the 19th March to 22nd April, 1923, from 6 p.m. to 6 a.m. The total restriction amounted to 408 hours.

The rainfall registered at the Woodhead Reservoir, from 1st October, 1922 to 31st March, 1923 = 13.06 inches, as compared with 19.93 inches in the corresponding period of last year.

INSPECTION OF MEAT AND OTHER FOODS.

TABLE XXVI.

Return of meat from animals slaughtered outside the City and brought in for consumption which was inspected at the Depôts appointed by the Council, and of meat brought in by rail and inspected at the premises of the Consignees under agreement with the Council. Period: 1st July, 1922, to 30th June, 1923.

Description.	Inspected.	Passed.	Condemned.	Percentage Condemned.
*Carcases of Beef	6,576	6,575	1	0.015
Parts of Beef	673	643	30	4.458
Ox Heads	5,147	5,099	48	0.932
Ox Hearts	5,373	5,310	63	1.172
Ox Tongues	5,962	5,803	159	2.666
Ox Livers	5,117	4,158	959	18.741
Ox Lungs	1,830	1,538	292	15.956
Ox Kidneys	11,328	11,320	8	0.070
Ox Spleens	4,053	4,045	8	0.197
Ox Skirts	93	93	—	—
Carcases of Veal	835	833	2	0.239
Parts of Veal	84	84	—	—
Calves' Plucks	101	101	—	—
Carcases of Mutton	55,919	55,882	37	0.066
Parts of Mutton	2,423	2,416	7	0.288
Sheeps' Plucks	48,193	48,122	71	0.147
*Carcases of Pork	8,822	8,680	142	1.609
Parts of Pork	22	22	—	—
Pigs' Plucks	7,075	6,776	299	4.226

* 73 pieces of beef weighing 717½ lbs., and 91 pieces of pork weighing 764 lbs., were also condemned during the year.

In addition to the above the following portions of the above carcasses and portions of viscera were also condemned at the same Depôts.

Description.	Number.
Ox Fat	1
Ox Tripes	1
Sheep Livers	7,151
Sheep Lungs	6,451
Pigs' Livers	889
Pigs' Lungs	3,190
Pigs' Kidneys	1

TABLE XXVII.

Return showing number and portions of carcasses of meat which were condemned at the Depôts appointed by the Council and at the premises of the consignees under agreement with the Council, classified under the various diseases for which they were condemned. Period: 1st July, 1922, to 30th June, 1923.

Description.	Number.	Tuberculosis.	Bruised.	Measles.	Emaciation.	Inflammation.	Cysts.	Flukes.	Angiomatosis.	Abscess.	Actinomycosis.	Tapeworm.	Strongylus Rufescens.	Pleurisy.	Pyæmia.	Peritonitis.	Swine Fever.	Suffocation.	Jaundice.	Pericarditis.	Presternal Calcification.	Putrefaction.	Pneumonia.	Necrosis.	Cirrhosis.	Hepatitis	Dropsy.	Bacillary Necrosis.	
Carcases of Beef	1	1																											
Parts of Beef..	103	86													4						5	1							
Ox Livers ..	959			2			117	602	116	91	1								8			18			3	1			
Ox Heads ..	48			44							4																		
Ox Tongues ..	159			113							43																		
Ox Hearts ..	63			40															1	22									
Ox Kidneys ..	8						5			3																			
Ox Lungs ..	292					83	208			1																			
Ox Spleens ..	8						8																						
Ox Fat ..	1														1														
Ox Tripe ..	1																					1							
Carcases of Veal	2																		1			1							
Carcases of Mutton ..	37			15															1	12			1				8		
Parts of Mutton	7													3	2				1			1							
Sheep Livers	7 151					69	534	556		11		5,944							24					13					
Sheep Lungs	6,451					5,547	113			61			730																
Sheep Plucks	71					4	15			1	22			1					6			14					8		
Carcases of Pork	142	2		138											1		1												
Parts of Pork	91	41	4	1						27	8					1									2			7	
Pigs' Pluck ..	299	1		109		184	5																						
Pigs' Livers ..	889					1	849	34																	5				
Pigs' Lungs ..	3,190					3,082	108																						
Pigs' Kidneys	1																								1				
Total ..	19,974	44	91	447	15	8,970	1,962	1,192	116	202	78	5,944	730	4	8	1	1	1	53	22		5	39	1	15	9	1	16	7

INTERNED MEASLY BEEF.

Eighty-three and three-quarter carcasses of measly beef were detained and interned in Cold Storage at the Imperial Cold Storage Depôt, Dock Road, for the usual period of 28 days.

These carcasses all come under the category of imported meat; the total weight being 55,146 lbs.

LIST OF MEAT AND FOODSTUFFS WHICH HAVE BEEN CONDEMNED AS UNFIT FOR HUMAN CONSUMPTION AS THE RESULT OF ORDINARY INSPECTIONS BY THE SANITARY INSPECTORS DURING THE PERIOD 1ST JULY, 1922, TO 30TH JUNE, 1923.

Fresh meat	472 lbs.
Preserved meat	485 ..
Poultry	2,679 ..
Fish: Salted and preserved	5,720 ..
Eggs, 16,110	5,325 ..
Eggs: Ostrich, 86.. .. .	129 ..
Cheese	4,870 ..
Jam	886 ..
Sugar.. .. .	477 ..
Condensed milk	17,055 ..
Fruit: Fresh and preserved	1,110 ..
Fruit Dried.. .. .	2,418 ..
Bacon	985 ..
Sausage Skins	840 ..
Oatmeal	25 ..
Confectionery	1,128 ..
Other foodstuffs	756 ..

COW STABLES, DAIRIES AND MILK SHOPS.

Amended regulations for the registration of cow-keepers, dairymen and purveyors of milk; the regulation of cowsheds, dairies and milkshops; and for regulating the collection, storage, preparation and distribution of milk for sale, were promulgated on the 6th October, 1922, under Provincial Administration Notice No. 295 of 1922.

The regulations previously in force were revised and designed to improve the conditions under which the town milk supply is prepared, stored and distributed, and made to apply to the whole area under the jurisdiction of the Council. They provide for the prohibition of the sale of unsound milk, the inspection of dairy cattle, and for the inspection of dairy premises situated outside the city area. They prohibit the stabling of any other animal in stables licenced for dairy cattle. They enforce more stringent requirements in connection with premises intended to be used in dealing with milk, especially in regard to cleanliness. These include better means for cleansing and sterilizing milk utensils, cleansing cattle in preparation for milking, the cleansing of milkers hands and the wearing of clean overalls while milking, paving the entrance area to cowstables, and the daily flushing of the floor of the cowstable with water. Under these regulations the use in the open air of "dippers" or utensils for conveying milk from larger to smaller cans is strictly prohibited. Milk can only be delivered to customers in wide-mouthed glass bottles of half or one pint or two, three or four pints capacity fitted with a suitable disc cover, or in wide-mouthed cans of similar capacity without any ventilating openings, and so constructed as to prevent rain, dust or other contamination finding its way into the milk. If bottles are used they must be filled and sealed at the premises of the milk dealer and not in the open air. If cans are used and filled in the open air from larger cans, such larger cans must be fitted with taps, through which the milk shall be drawn and passed into the smaller cans for delivery. The small cans, under the Weights and Measures Act must be assized and used as measures. All taps must be removable and capable of being taken assunder for cleansing purposes.

The following is the enumeration of applications for licences, made by cow-keepers, purveyors of milk and ice cream vendors:—

	Cowkeepers.	Purveyors of Milk.	Ice Cream Vendors.
Applications for licences	232	92	276
Licences issued	140	58	99
Applications cancelled	41	23	20
Licences refused	16	8	—
Applications in abeyance	35	3	157
Applications for premises situate outside Capetown Area ..	—	6	—
Licences issued	—	5	—
Applications in Abeyance	—	1	—

BAKEHOUSES.

The bakers' shops and bakehouses in the City and Suburbs have been regularly inspected. Bakehouses are visited at night as well as during the day.

Many improvements have been made in the bakehouses during the year. The old type of "front firing oven" is being replaced by the much more hygienic method of firing from outside the bakehouse. Change rooms and suitable washing facilities for employees are now provided in all bakehouses.

The number of visits made by Sanitary Inspectors during the year was 1,005.

BUTCHERS' SHOPS.

Butchers' shops and the sale and handling of meat have received particular attention during the year. Most butchers have been prevailed upon to provide their shops with self closing fly and dust proof screen doors.

The regulation with respect to wrapping up meat in newspaper is being enforced.

A considerable improvement has taken place in the type of carts and wagons used in the conveyance of meat. All vehicles must be examined and passed by an officer of this department before being used for this purpose.

8,073 visits were made to butchers' shops during the year.

LAUNDRIES.

There has been an improvement in Laundry premises due in a great measure to the fact that practically all Laundries now come under the Factory Act and have to conform to requirements not provided for under Municipal Regulations.

MATTRESS MAKERS AND UPHOLSTERER.

These are being regularly inspected and during the year considerable progress has been made in the improvement of premises and conditions under which the work is being carried out therein.

Valuable assistance has been rendered the Department by the Inspector of Factories in this work.

PLACES OF AMUSEMENTS.

During the year 48 places of amusement were inspected and registered.

NIGHT SOIL, SLOP WATER AND REFUSE REMOVALS.

In the Wards known as Capetown proper, provision has been made for the disposal of all sewerage on the water carriage system by means of well-constructed sewers with an outfall into the sea at Green Point. A few houses in isolated positions are not connected with sewerage sewers. The sewerage of the Green Point and Sea Point areas is disposed of in a similar manner with an outfall at Sea Point, and that of Kalk Bay-Muizenberg on the same lines with the outfall on to the sand dunes on the border of False Bay. The other areas known as Maitland, Woodstock, Mowbray, Rondebosch and Claremont are dealt with on the pail system, the stercus being removed by wagon once a week and taken to various sites, one being beyond Kensington for Woodstock and Maitland, and Vijge Kraal Farm for Mowbray and Rondebosch, and one at a Municipal Farm in Claremont for Claremont. In other portions it is removed weekly, and is taken to tips adjacent to the locality.

A comprehensive scheme is, however, now being carried out for the sanitary improvement of these wards, the ratepayers having authorised the loan for same, and the work is being carried out as expeditiously as possible. A large proportion of the scheme is now completed, and house connections numbering over 6,500 have been made, amounting to about 50 per cent. of the total houses concerned.

BARBERS AND HAIRDRESSERS.

Barbers' and Hairdressers' shops are regularly inspected, particular attention being directed to the condition of towels and utensils.

COMMON LODGING HOUSES.

There are now only three premises registered as Common Lodging Houses in the City. Comprising in all about 15 beds. These three premises have all regular lodgers and are not available for casuals.

92 visits have been made to these premises by Sanitary Inspectors during the year.

EXTERMINATION OF RATS.

Three men and one boy have been employed in Rat catching. Dogs and ferrets are employed and a large number of traps have been loaned to householders who are instructed by the Ratcatcher how to set and bait them. In the Docks area a Corporation Ratcatcher works in conjunction with the Railway and Harbour Ratcatcher.

In order to obtain a correct return of rats destroyed, Ratcatchers are required to produce the tails of rats killed by them each day when submitting their reports. These tails are received, counted and then destroyed by an Inspector.

The number of rats killed during the year is 9,272.

MOSQUITOES AND FLIES.

During the summer months two men are constantly employed in disinfecting catchpits and other places where mosquitoes are likely to breed. Sanitary Inspectors see that manure is not allowed to accumulate in stables and manure receptacles, and that manure placed in gardens, etc., is at once dug in.

GENERAL DEALERS AND OTHER LICENCES.

In my last report I referred to an Ordinance to Amend the Law Relating to the Licensing of Trades, Businesses, Occupations or Callings (Ordinance No. 16, 1920) which came into force on the 1st January, 1921. Section 6 of this Ordinance reads as follows:—

“*Circumstances under which Certificate may be granted or refused.*

“6. (1) Where application for a certificate as aforesaid for a general dealer's licence is made to any Municipal Council or Village Management Board, by or on behalf of any person whose name does not appear upon the list framed for the area of such Council or Board under the provisions of Ordinance No. 19 of 1914, and maintained under the provisions of Section Eight hereof, no such application will be considered unless,

(a) The Health Officer for the area or other Medical Practitioner, approved by the Council or Board, shall have reported that the premises are fit and suitable for the business proposed to be carried on thereat, and that he knows of no reason why the said certificate should be refused on the ground of public health, and

(b) the Council or Board shall have inquired from the senior officer of police for the area, if anything is known against the applicant that should be brought to the notice of the said Council or Board.”

This section of the Ordinance also applies *mutatis mutandis* to every baker, butcher, and dealer, but does not apply to hawkers, who are dealt with by Municipal Regulations promulgated in 1914 and amended in 1919. The whole of these regulations were re-drafted and submitted to the Council on the 27th April, 1922, and promulgated in July, 1922.

The number of applications for licences under various callings received are as follows:—

General Dealers	1,020
Dealers	326
Butchers	120
Bakers	6
Hawkers	404
Cape Divisional Council Hawk-ers	21

These applications necessitated an enormous amount of work as will be seen by the number of inspections shown in Table XXVIII.

INSANITARY PROPERTY.

A large amount of work has been done in repairing and improving insanitary property, but owing to the scarcity of houses the Council have been holding their hands with regard to the closing of houses.

CAMPING.

For many years past a piece of municipal land, adjoining the beach at Clifton-on-Sea, has been used as a camping site on which bungalows have been erected by private persons who rent plots of land from the Council.

Tents are also allowed to be placed on vacant lots. A caretaker has been appointed to see that the camp is maintained in a satisfactory condition, and to attend to the pail closets which have been erected in suitable situations. This man and his assistant now work under the control of the Housing and Estates Committee.

The Sanitary Inspector at Camps Bay pays frequent visits to the Camp and reports to me with regard to the sanitation thereof.

Municipal land at Bakoven Bay has been dealt with in a similar manner to that at Clifton-on-Sea.

There is also a camping site at Muizenberg.

During the year 113 applications for the erection of tents were received and of these, 109 were approved and 4 refused.

Infectious Disease—

Visits on receipt of notification	5,738
Drains tested	625
Premises Disinfected—for Tuberculosis	518
for Other Diseases	1,005
Articles Disinfected—for Tuberculosis	1,314
for Other Diseases	1,329

Inspections in re Applications for Licences—

(Under Ordinance 16 of 1920)—

Hawkers	802
General Dealers	1,672
Bakers	21
Butchers	214
Dealers	489
Mineral Water Factory	7

(Under Municipal Regulations)—

Cowkeepers and Purveyors of Milk (combined)	683
Purveyors of Milk only	398
Ice Cream Vendors	412
Mattress Makers	5
Laundries	3
Hairdressers	1

<i>Visits to the City Hospital for the collection of Meteorological data</i>	371
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<i>Visits in re applications for permits to erect tents and inspections thereof when occupied</i>	516
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Rats, Destruction of—

Complaints re Rats	628
Number of Rats caught and destroyed	9,272

Nuisances Abated and Premises Cleansed, etc.—

Obstructions removed from drains and defective drains repaired	3,676
Drain Ventilating Pipes repaired or new ones fixed	183
Defective Traps removed and Glazed Earthenware substituted	57
Water Closets repaired and new pans fixed	364
Pail Closets repaired	828
Water restored to Water Closets and Flushing Cisterns repaired	1,289
Water Closets and Urinal accommodation provided	338
Defects in Yard Paving remedied	1,345
Defects in Street Gutters remedied	553
Offensive Matter removed	4,339
Private Gutters and Lanes cleansed	1,804
Houses, or parts of Houses, cleansed or whitewashed	2,287
Stable Floors repaired	447
Receptacles for Manure provided	99
Horses and Other Animals destroyed and buried	87
Animals and Poultry kept in dirty state	1,440
Defective Roofs and General Dilapidations	1,147
Defective Roof Guttering repaired	402
Prescribed Receptacles for Storing House Refuse provided	658
Overcrowding abated	109

Matters concerning, and reported to, the City Engineer's Department—

Structural defects	989
Defective Catchpits	21
Defective Roadways	33
Defective Footpaths	57
Defective Water Fittings	257
Insufficiency or Non-supply of Water	80
Non-removal of Sanitary Pails	3
Non-removal of House Refuse	19

TABLE XXIX.

CASES BEFORE THE MAGISTRATE.

Legal proceedings for year ended 30th June, 1923 ;—

No. of Summonses issued.	Nature of offence.	Penalty— Total fines.
3	Carrying on business as a cowkeeper, dairyman and purveyor of milk without being licensed	£10 0 0
15	Failing to take proper precautions in connection with the storage and distribution of milk	48 0 0
1	Slaughtering a calf contrary to Municipal Regulations ..	3 0 0
5	For using wagons in a filthy condition for the transport of meat intended to be exposed for sale	10 10 0
3	Using for the conveyance of meat a vehicle not sanctioned by the Council	7 0 0
1	Failing to have name and address of owner on vehicle used for the conveyance of meat	2 0 0
1	Offering for sale meat not bearing the stamp of the Corporation as being fit for food purposes	3 0 0
1	Exposing unsound food for sale	2 0 0
1	Using a room where food was kept and exposed for sale as a sleeping apartment	12 10 0
2	Keeping business premises in an insanitary condition ..	3 0 0
4	Keeping residential premises in an unclean and offensive condition	13 0 0
1	Keeping an accumulation of rubbish on premises	5 0 0
1	Using a structure as a stable after having been warned to refrain from doing so	1 0 0
1	Causing or allowing cowdung from stable to pass into Corporation sewer	1 0 0
1	Failing to keep a stable clean	4 0 0
3	Failing to have defective drains repaired	4 0 0
2	Failing to provide a proper supply of water	7 0 0
1	By refusing a sanitary inspector entrance to premises ..	10 0 0
47		£147 0 0

STAFF.

The Staff at present consists of an:—

- Assistant Medical Officer of Health (Dr. A. W. Reid, M.D., C.M., D.P.H., M.R.San.Inst).
- Assistant to the Medical Officer of Health (Dr. Mary van Ingen, D.P.H.).
- Chief Clerk (Mr. F. C. Tucker).
- Chief Sanitary Inspector (Mr. G. S. Chedburn, Assoc.R.San.Inst).
- Chief Sanitary Inspectress (Mrs. B. C. H. Martin, Assoc.R.S.Inst.).
- Inspector for the removal of patients suffering from infectious diseases.
- Assistant Inspector for the removal of patients suffering from infectious diseases.
- 17 Certificated Sanitary Inspectors.
- 3 Un-certificated Sanitary Inspectors.
- 10 Sanitary Inspectresses: One with General Training and Certificate of The Royal Sanitary Institute for Sanitary Inspectors. One with with General and Fever Training and Certificate of the Royal Sanitary Institute for Sanitary Inspectors. One with General Training and Certificate of the Royal Sanitary Institute for Health Visitors. Two with Midwifery and Certificate of the Royal Sanitary Institute for Sanitary Inspectors, and five with Midwifery only.
- 1 Apprentice Sanitary Inspector.
- 5 Permanent Clerks.
- 7 Temporary Clerks.
- 2 Junior Clerks.

HOSPITALS.

Acting Medical Superintendent (Dr. W. P. Cooney, L.R.C.P., D.P.H.).

City Hospital.

Matron (Miss M. Cain).

Assistant Matron (Miss M. Blair).

4 Trained Nurses.

9 Junior Nurses.

Temporary Nurses as appointed, and the requisite domestic servants and porters.

Smallpox Hospital.

Superintendent (J. Enstrom).

Table A.

DEATHS which occurred during the Year ended June 30th, 1923, arranged as to Causes, Race, Age-periods and Wards of the City to which they belong.

SUMMARY.

AGE PERIODS.

CAUSES OF DEATH.	Race.	0 to 1.		1 to 5		Total under 5 years.		5 to 15.		15 to 25.		25 to 35.		35 to 45.		45 to 55.		55 to 65.		65 to 75.		75 and over.		TOTAL.	
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Race and Sex Summary ...	{ E O }	99 457	97 404	34 243	35 197	133 701	132 601	18 40	17 65	35 74	26 109	41 95	34 85	67 109	50 87	112 96	50 73	126 79	50 59	95 49	84 40	53 44	75 35	680 1286	518 1154
I. Specific Febrile, or Zymotic Diseases ...	{ E O }	13 100		19 88		32 188		17 43		20 112		24 100		28 80		25 39		17 14		9 5		5 4		177 585	
II. Parasitic Diseases ...	{ E O }	...		...		...		...		...		...		...		...		...		...		...		1 2	
III. Dietetic Diseases ...	{ E O }	...		...		...		...		...		...		...		...		...		...		...		7 2	
IV. Constitutional Dis-eases ...	{ E O }	...		...		...		...		...		...		...		...		...		...		...		144 69	
V. Developmental Dis-eases ...	{ E O }	...		...		...		...		...		...		...		...		...		...		...		87 151	
VI. Local Diseases ...	{ E O }	...		...		...		...		...		...		...		...		...		...		...		696 1,502	
VII. Deaths from Violence ...	{ E O }	...		...		...		...		...		...		...		...		...		...		...		58 54	
VIII. Accident to Child through Parturition ...	{ E O }	...		...		...		...		...		...		...		...		...		...		...		4 12	
IX. Deaths from ill-defined and not specified causes ...	{ E O }	...		...		...		...		...		...		...		...		...		...		...		24 63	
TOTALS ...	{ E O }	196 861		69 440		265 1,301		35 105		61 183		75 180		117 196		162 169		176 138		179 89		128 79		1,198 2,440	
TOTALS ALL CLASSES		1,057		509		1,566		140		244		255		313		331		314		268		207		3,638	

DEATHS, ARRANGED AS TO CAUSES, RACE, AGE-PERIODS AND WARDS—continued.																																		
SUMMARY.			WARDS.																															
CAUSES OF DEATH.	Race.	Sea Point No. 1.		Harbour No. 2.		West Central No. 3.		Kloof No. 4.		Park No. 5.		East Central No. 6.		Castle No. 7.		Woodstock No. 8.		Salt River No. 9.		Mowbray No. 10.		Maitland No. 11.		Rondebosch No. 12.		Claremont No. 13.		Kalk Bay No. 14.		Not allocated. *	Deaths in City, not belonging thereto.		TOTAL.	
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F		M	F	M	F
Race and Sex Summary ...	{ E O }	51 7	36 10	64 70	18 37	16 79	8 62	44 57	26 64	39 9	28 15	60 209	26 174	24 158	18 150	74 69	64 66	59 103	71 97	49 33	57 41	15 134	29 109	43 149	29 142	35 106	30 99	21 32	19 41	...	86 71	59 46	680 1286	518 1154
I. Specific Febrile, or Zymotic Diseases...	{ E O }	11 5	...	11 25	...	3 33	...	11 25	...	7 6	...	12 93	...	5 79	...	21 34	...	25 39	...	24 21	...	6 69	...	8 52	...	9 44	...	7 18	...	...	17 41	...	177 585	
II. Parasitic Diseases...	{ E O }	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
III. Dietetic Diseases ...	{ E O }	...	...	...	3	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
IV. Constitutional Diseases ...	{ E O }	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
V. Developmental Diseases ...	{ E O }	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
VI. Local Diseases ...	{ E O }	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
VII. Deaths from Violence ...	{ E O }	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
VIII. Accident to Child through Parturition ...	{ E O }	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
IX. Deaths from ill-defined and not specified causes ...	{ E O }	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
TOTALS ...	{ E O }	87 17	...	82 107	...	24 141	...	70 121	...	67 24	...	86 383	...	42 308	...	138 135	...	130 200	...	106 74	...	44 213	...	72 291	...	65 205	...	40 73	...	...	...	145 117	...	1,198 2,440
TOTALS ALL CLASSES...		104	...	189	...	165	...	191	...	91	...	469	...	350	...	273	...	330	...	180	...	287	...	363	...	270	...	113	...	1	...	262	...	3,638

* Not allocated ; Body of a coloured female, vagrant, found on mountain side near Blinkwater Gorge.

[illegible]

DEATHS, ARRANGED IN CAUSES, AGES AND WARDS—continued.

AGE PERIODS. WARDS.

CAUSES OF DEATH.	Race.	0 to 1.	1 to 5.	Total under 5 years.	5 to 15.	15 to 25.	25 to 35.	35 to 45.	45 to 55.	55 to 65.	65 to 75.	75 and over.	TOTAL.	Sea Point No. 1.	Harbour No. 2.	West Central No. 3.	Kloof No. 4.	Park No. 5.	East Central No. 6.	Castle No. 7.	Woodstock No. 8.	Salt River No. 9.	Mowbray No. 10.	Maitland No. 11.	Rondebosch No. 12.	Claremont No. 13.	Kalk Bay No. 14.	Not Allocated.*	Deaths in City not belonging thereto	TOTAL.			
A.—MIASMATIC DISEASES—continued.	{E}{O}	...	1	1	4	8	3	3	4	2	...	...	25	2	2	...	3	...	...	...	...	12	1	...	...	...	...	1	...	3	25
	{E}{O}	...	1	1	8	11	5	4	1	...	...	...	30	...	...	...	3	...	...	...	...	3	...	...	...	...	...	1	...	3	30
	{E}{O}	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	{E}{O}	...	2	2	...	1	...	...	...	...	...	...	3	...	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...
	{E}{O}	1	2	3	3	1	...	...	...	...	...	...	7	...	1	...	...	1	3	...	1	...	1	...	...	...	...	...	...	...	...
	{E}{O}	4	8	12	5	2	...	...	...	...	...	...	19	...	...	1	1	2	5	4	...	2	1	2	...	2	...	...	...	...	...
	{E}{O}	...	...	...	...	...	...	...	...	...	...	...	64	7	5	1	7	2	5	3	6	6	8	3	2	4	2	...	3	64	
	{E}{O}	...	23	31	19	81	87	59	30	10	3	2	322	3	19	21	12	3	3	43	25	19	10	30	23	27	10	...	19	322			
	{E}{O}	...	5	7	3	3	2	2	...	1	11	1	3	1	2	1	3	1	1	
	{E}{O}	...	...	...	...	...	...	...	...	...	...	...	...	33	...	...	2	...	3	5	...	...	2	...	3	3	4	...	...	...	...
	{E}{O}	
	{E}{O}	1	1	1	1	...	...	1	2	...	2	...	2	7	...	...	...	...	...	...	1	...	2	...	1	...	...	1	...	1	7
	{E}{O}	5	2	
	{E}{O}	
	{E}{O}

* See footnote to Summary (second portion).

DEATHS, ARRANGED IN CAUSES, AGES AND WARDS.—continued.														
AGE PERIODS.														
CAUSES OF DEATH.	Race.	AGE PERIODS.										WARDS.		
		0 to 1.	1 to 5.	Total under 5 years.	5 to 15.	15 to 25.	25 to 35.	35 to 45.	45 to 55.	55 to 65.	65 to 75.	75 and over.	TOTAL.	Sea Point No. 1.
														Harbour No. 2.
														West Central No. 3.
														Kloof No. 4.
														Park No. 5.
														East Central No. 6.
														Castle No. 7.
														Woodstock No. 8.
														Salt River No. 9.
														Mowbray No. 10.
														Maitland No. 11.
														Rondebosch No. 12.
														Claremont No. 13.
														Kalk Bay No. 14.
														Deaths in City not belonging thereto.
														TOTAL.
A.—MIASMATIC DISEASES.—continued.														
17. Leprosy	{ E } { O }	...	...	...	...	...	...	...	...	...	...	...	...	...
18. Tetanus... ..	{ E } { O }	...	...	...	...	2	...	1	...	...	...	...	1	...
19. Epidemic Cerebro - Spinal Meningitis.	{ E } { O }	...	2	2	1	1	...	...	...	...	...	...	3	...
20. Acute Anterior Poliomyelitis	{ E } { O }	1	...	1	...	...	...	...	...	...	...	...	2	...
B.—DIARRHEAL DISEASES.														
1. Simple Cholera	{ E } { O }	...	...	...	...	...	...	...	...	...	...	...	...	...
2. Diarrhœa	{ E } { O }	39	11	3	...	...	...	1	...	1	...	1	4	...
3. Dysentery	{ E } { O }	1	1	2	...	...	1	4	3	3	6	...	13	...
C.—MALARIAL DISEASES.														
1. Remittent Fever	{ E } { O }	...	...	...	...	...	...	...	...	...	...	...	...	...
2. Ague	{ E } { O }	...	...	...	...	...	...	...	...	...	...	...	...	...
3. Malaria	{ E } { O }	...	1	1	...	...	...	1	...	...	...	...	2	...

DEATHS, ARRANGED IN CAUSES, AGES AND WARDS—continued.

CAUSES OF DEATH.	Race.	AGE PERIODS.										WARDS.																				
		0 to 1.	1 to 5.	Total under 5 years.	5 to 15.	15 to 25.	25 to 35.	35 to 45.	45 to 55.	55 to 65.	65 to 75.	75 and over.	TOTAL.	Sea Point No. 1.	Harbour No. 2.	West Central No. 3.	Kloof No. 4.	Park No. 5.	East Central No. 6.	Castle No. 7.	Woodstock No. 8.	Salt River No. 9.	Mowbray No. 10.	Maitland No. 11.	Rondebosch No. 12.	Claremont No. 13.	Kalk Bay No. 14.	Not allocated.*	Deaths in City not belonging thereto.	TOTAL.		
D.—ZOOGENOUS DISEASES.	{ E } { O }	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
1. Cow-pox, and effects of Vaccination	{ E } { O }	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
2. Other Diseases, Hydrophobia, Glanders	{ E } { O }	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
3. Splenic Fever ...	{ E } { O }	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...
E.—VENEREAL DISEASES.	{ E } { O }	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
1. Syphilis ...	{ E } { O }	2 24	1 1	3 25	...	1	...	4	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...
2. Gonorrhoea, Stricture of Urethra	{ E } { O }	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
F.—SEPTIC DISEASES.	{ E } { O }	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
1. Erysipelas ...	{ E } { O }	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
2. Pyæmia, Septicæmia	{ E } { O }	...	2	4	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...
3. Puerperal Septicæmia	{ E } { O }	...	...	...	...	1	2	1	...	2	2	2	...	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...
4. Puerperal Peritonitis	{ E } { O }	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...
Totals for I. ...	{ E } { O }	13 100	19 88	32 188	17 43	20 112	24 100	28 80	25 39	17 14	9 5	5 4	177 585	11 5	11 25	3 33	11 25	7 6	12 93	5 79	21 34	25 39	24 21	6 69	8 52	9 44	7 18	...	17 41	177 585		

* See footnote to Summary (second portion).

[illegible]

DEATHS, ARRANGED IN CAUSES, AGES AND WARDS.—continued.

CAUSES OF DEATH.	Race.	AGE PERIODS.										Total under 5 years.	WARDS.					TOTAL.
		0 to 1.	1 to 5.	Total under 5 years.	5 to 15.	15 to 25.	25 to 35.	35 to 45.	45 to 55.	55 to 65.	65 to 75.		75 and over.					
VI. Local Diseases.																		
A.—DISEASES OF NERVOUS SYSTEM.																		
1. Inflammation of Brain or Membranes ...	{ E } { O }	5 23	6 12	11 35	2 6	1 1	1 ...	...	...	3 ...	1 1	...	19 43	2	2	1	...
2. Apoplexy, Softening of the Brain, Hemiplegia, Brain Paralysis ...	{ E } { O }	3 ...	...	3 ...	...	1 ...	...	7 6	8 11	11 16	28 13	17 11	75 59	5	3	1	6
3. Insanity, General Paralysis of the Insane ...	{ E } { O }	...	1 ...	1 ...	...	1 ...	2 6	8 5	6 1	1 1	1 ...	...	19 15	...	...	...	2
4. Epilepsy ...	{ E } { O }	...	...	...	1 ...	...	1 1	1 ...	1 ...	2 1	1 2	...	7 7	1	1	...	...
5. Convulsions ...	{ E } { O }	11 50	2 5	13 55	...	...	...	...	...	...	...	...	13 56	1	...	...	...
6. Laryngismus Stridulus (Spasm of Glottis) ...	{ E } { O }	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
7. Disease of Spinal Cord, Paraplegia ...	{ E } { O }	...	...	...	...	1 ...	...	3 2	2 2	2 2	2 ...	...	8 9	1	1	...	...
8. Other Diseases of the Nervous System ...	{ E } { O }	...	1 2	1 4	3 1	...	...	2 1	1 ...	2 ...	3 1	...	11 10	2	...	...	...

DEATHS, ARRANGED IN CAUSES, AGES AND WARDS.—continued.															
WARDS.															
AGE PERIODS.															
CAUSES OF DEATH.	Race.	0 to 1.	1 to 5.	Total under 5 years.	5 to 15.	15 to 25.	25 to 35.	35 to 45.	45 to 55.	55 to 65.	65 to 75.	75 and over.	TOTAL.	Deaths in City, not belonging thereto.	TOTAL.
VI. Local Diseases—contd.															
B.—DISEASES OF ORGANS OF SPECIAL SENSE.															
Of Ear, Eye, Nose ...	{ E O }	...	...	...	...	...	...	1	...	1	...	...	2	...	2
C.—DISEASES OF CIRCULATORY SYSTEM.															
1. Pericarditis ...	{ E O }	...	1	1	1	...	1	...	...	...	...	...	2	...	2
2. Acute Endocarditis ...	{ E O }	...	1	1	...	5	...	1	4	1	1	...	13	3	3
3. Valvular Diseases of the Heart ...	{ E O }	...	...	...	2	1	...	6	10	15	15	5	54	4	54
4. Other Diseases of the Heart ...	{ E O }	1	3	5	3	3	1	13	15	15	7	3	68	3	68
5. Aneurism ...	{ E O }	...	...	...	...	...	5	5	13	25	28	22	101	4	101
6. Embolism, Thrombosis ...	{ E O }	...	...	...	...	...	...	7	19	15	8	9	73	1	73
7. Other Diseases of Blood Vessels ...	{ E O }	...	...	...	...	...	...	2	3	1	...	...	8	1	8
		...	...	...	...	...	2	...	1	...	...	...	3	...	3
		...	...	...	...	...	...	1	...	2	2	...	7	1	7
	
		...	...	...	...	...	...	2	...	...	...	...	...	...	...
		...	...	...	...	...	...	2	1	8	3	8	22	2	22
		...	...	...	...	...	...	2	1	3	8	3	17	1	17

DEATHS, ARRANGED IN CAUSES, AGES AND WARDS—continued.																														
CAUSES OF DEATH.	AGE PERIODS.								WARDS.																					
	Race.	0 to 1.	1 to 5.	Total under 5 years.	5 to 15.	15 to 25.	25 to 35.	35 to 45.	45 to 55.	55 to 65.	65 to 75.	75 and over.	TOTAL.	Sea Point No. 1.	Harbour No. 2.	West Central No. 3.	Kloof No. 4.	Park No. 5.	East Central No. 6.	Castle No. 7.	Woodstock No. 8.	Salt River No. 9.	Mowbray No. 10.	Maitland No. 11.	Rondebosch No. 12.	Claremont No. 13.	Kalk Bay No. 14.	Deaths in City, not belonging thereto.	TOTAL.	
VI. Local Diseases—continued.																														
E.—DISEASES OF DIGESTIVE SYSTEM—contd.																														
3. Diseases of the Stomach ...	{ E O }	37 140	6 75	43 215	... 2	1 2	2 ...	2 1	... 1	... 2	2 1	... 1	50 224	... 4	... 3	... 8	... 1	... 1	... 1	... 32	... 1	... 3	... 8	... 4	... 6	... 50 224	... 4	... 6	... 224	
4. Enteritis ...	{ E O }	12 54	5 18	17 72	... 1	... 2	... 2	1 ...	3 1	... 1	1 ...	... 1	22 80	... 2	... 5	... 4	... 13	... 1	... 1	... 2	... 1	... 1	... 1	... 5	... 22	... 5	... 1	... 80	
5. Obstructive Diseases of Intestine ...	{ E O }	... 2	... ...	... 2	... 1	4 2	4 4	1 2	1 ...	... ...	3 ...	... ...	15 11	... 2	... 1	... 3	... 2	... ...	... ...	... 1	... 1	... ...	... ...	... 3	... 15	... 1	... ...	... 11
6. Hernia...	{ E O }	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... 1	1 ...	... ...	2 1	... 1	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... 1	... ...	... 2	... 1	... ...	... 1
7. Peritonitis ...	{ E O }	... ...	... ...	... ...	... 1	... 3	1 1	... ...	2 2	1 ...	... 1	... ...	4 8	... 1	... 1	... 2	... 1	... ...	... ...	... 1	... 1	... ...	... 1	... ...	... 4	... ...	... ...	... 8
8. Ascites ...	{ E O }	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... 1	... ...	... 1	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... 1
9. Cirrhosis of Liver ...	{ E O }	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... 1	2 ...	1 1	... ...	3 2	... 1	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... 3
10. Jaundice, and other Diseases of Liver ...	{ E O }	... 3	1 1	1 4	... ...	... ...	3 1	1 ...	6 2	2 5	2 ...	... ...	17 12	... 4	... ...	... ...	1 1	... ...	... ...	... ...	... ...	... 1	... 2	... 7	... 17	... 7	... 12	... 17
11. Other Diseases of the Digestive System ...	{ E O }	... 2	... ...	... 2	... ...	... ...	... ...	1 1	1 ...	... ...	... ...	... ...	2 3	... 1	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... 2

[illegible]

Table B.
RETURN of Births which occurred during the year ended June 30th, 1923, as registered up to 7th September, 1923, classified into Wards, etc.

WARDS.	EUROPEAN.						OTHER THAN EUROPEAN.						TOTALS.				STILL-BIRTHS.						
	LEGITIMATE.			ILLEGITIMATE.			TOTALS.			LEGITIMATE.			ILLEGITIMATE.			TOTALS.			EUROPEAN.		OTHER THAN EUROPEAN.		TOTAL STILL-BIRTHS.
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	E.	O.	Total.	Legit.	Illegit.	Legit.	Illegit.	
1. Sea Point	77	94	3	3	80	97	177	21	8	6	7	27	15	42	42	177	42	219	4	Nil.	Nil.	3	7
2. Harbour	40	40	7	7	47	47	94	54	46	12	14	66	60	126	126	94	126	220	7	Nil.	3	3	13
3. Central (West)	15	14	6	1	21	15	36	91	91	23	18	114	109	223	223	36	223	259	Nil.	Nil.	8	9	17
4. Kloof	59	59	4	4	63	63	126	109	105	32	40	141	145	286	286	126	286	412	2	Nil.	15	9	26
5. Park	71	56	1	6	72	62	134	18	26	15	14	33	40	73	73	134	73	207	7	Nil.	6	7	20
6. Central (East)	72	61	6	3	78	64	142	284	265	119	87	403	352	755	755	142	755	897	5	2	50	34	91
7. Castle	49	68	5	5	54	73	127	268	234	61	60	329	294	623	623	127	623	750	3	Nil.	45	12	60
8. Woodstock	175	168	8	12	183	180	363	108	112	23	20	131	132	263	263	363	263	626	10	3	17	7	37
9. Salt River	148	156	10	8	158	164	322	131	121	50	49	181	170	351	351	322	351	673	11	Nil.	14	8	33
10. Mowbray	79	96	4	3	83	99	182	49	48	16	22	65	70	135	135	182	135	317	4	1	7	2	14
11. Maitland	69	67	5	4	74	71	145	124	103	57	61	181	164	345	345	145	345	490	7	Nil.	20	10	37
12. Rondebosch	77	47	2	4	79	51	130	181	152	66	66	247	218	465	465	130	465	595	1	Nil.	21	8	30
13. Claremont	75	97	5	1	80	98	178	156	152	46	41	202	193	395	395	178	395	573	4	1	20	8	33
14. Kalk Bay	40	42	2	1	42	43	85	55	59	24	21	79	80	159	159	85	159	244	4	Nil.	4	10	18
Births in City not belonging thereto	67	47	26	16	93	63	156	14	7	20	23	34	30	64	64	156	64	220	4	Nil.	1	3	8
City of Capetown	1,113	1,112	94	78	1,207	1,190	2,397	1,663	1,529	570	543	2,233	2,072	4,305	4,305	2,397	4,305	6,702	73	7	231	113	444

Table D.

Comparative Table of Estimated Populations and Vital Statistic Rates for various years for the City of Capetown.

Year (1st July to 30th June).	Estimated Populations.		Birth Rates.		Percentage of Illegitimate Births of Total Births.		Death Rates.		Death Rates corrected for Visitors.		Zymotic Death Rates.		Tuberculosis Death Rates.		Infant Mortality.	
	Euro- peans.	Others.	Euro- peans.	Others.	Euro- peans.	Others.	Euro- peans.	Others.	Euro- peans.	Others.	Euro- peans.	Others.	Euro- peans.	Others.	Euro- peans.	Others.
1913-1914*	76,940	74,560	59.39	45.48	6.50	25.75	13.77	28.25	12.10	27.02	0.80	1.93	1.35	5.11	107.96	250.54
1914-1915	79,840	75,510	59.95	47.52	6.90	26.48	14.28	59.73	12.73	58.39	1.03	2.73	1.24	5.46	100.30	224.40
1915-1916	82,860	76,470	57.60	48.36	7.48	33.79	12.84	57.66	11.28	56.04	0.64	1.90	1.04	4.69	79.20	189.30
1916-1917	85,990	77,450	58.17	45.84	6.77	25.07	16.04	34.42	13.34	32.70	1.19	4.73	1.43	5.95	96.20	226.76
1917-1918	89,240	78,440	27.59	46.31	7.03	25.35	13.47	30.53	11.48	27.89	0.83	2.97	1.01	5.37	79.20	200.93
1918-1919	92,610	79,450	23.83	41.21	8.30	24.77	25.19†	69.97†	22.08†	66.09†	0.68	2.43	0.98	4.32	114.69†	297.80†
1919-1920	96,110	80,450	56.17	51.88	6.44	24.75	12.92	28.65	11.08	27.06	0.81	2.66	0.94	4.11	81.51	183.76
1920-1921	99,750	81,490	25.34	46.41	5.8	25.4	13.68	32.56	12.03	30.64	0.98	3.69	0.81	4.36	106.01	237.70
1921-1922	103,520	82,530	24.36	51.90	6.7	26.6	11.88	27.46	10.63	26.18	0.40	1.57	1.04	3.71	68.60	175.58
1922-1923	107,430	83,590	22.31	51.50	7.2	25.8	11.15	29.19	9.80	27.79	0.62	1.81	0.76	4.51	81.77	200.00

* This period represents 296 days; Unification took place on the 8th September, 1913.
† Including deaths caused by the Epidemic of Spanish Influenza in October, 1918.

Table E.

BAROMETRICAL READINGS, 1922-1923.

CORRECTED FOR ALTITUDE, TEMPERATURE, INDEX ERROR, CAPACITY AND CAPILLARITY.

Month.	Mean.	Average for sixteen years, 1st July, 1906, to 30th June, 1922.	Highest.	Date.	Lowest.	Date.	Highest and Date for sixteen years, 1st July, 1906, to 30th June, 1922.	Lowest and Date for sixteen years, 1st July, 1906, to 30th June, 1922.
1922.								
July	30·324	30·293	30·478	8th	30·131	30th	20th, 1921.	28·924 13th, 1917.
August	30·211	30·265	30·504	6th	29·758	20th	26th, 1921.	29·753 29th, 1920.
September	30·271	30·238	30·468	6th	30·076	30th	8th, 1921.	29·694 13th, 1907.
October	30·245	30·208	30·464	24th	30·022	6th	5th, 1912.	29·727 6th, 1920.
November	30·168	30·225	30·504	24th	30·012	27th	24th, 1913.	29·905 26th, 1909.
December	32·007 30·261	30·128	30·349	25th	30·082	31st	31st, 1921.	29·754 24th, 1906.
1923.								
January	30·122	30·098	30·273	20th	29·945	22nd	30th, 1917.	29·757 17th, 1911.
February	30·168	30·086	30·945	9th	29·976	15th	19th, 1921.	29·775 4th, 1921.
March	30·092	30·145	30·283	15th	29·786	29th	11th, 1921.	29·002 15th, 1921.
April	30·182	30·154	30·428	22nd	30·006	3rd	10th, 1909.	29·098 3rd, 1916.
May	30·186	30·220	30·540	17th	29·898	10th	1st, 1921.	29·078 19th, 1916.
June	30·208	30·280	30·534	11th	29·900	7th	22nd, 1915	29·089 10th, 1916.
Year	30·349 198	30·195 191	30·945	9/2/23	29·758	20/8/22	26/8/1921.	28·924 13/7/1917.

RAINFALL AND HUMIDITY, 1922-1923.											
Menth.		RAINFALL.							HUMIDITY.		
		Amount in Inches.	Average for sixteen Yrs. in inches, 1st July, 1906 to 30th June, 1922.	No. of Rainy Days.	Average rainy days for sixteen Yrs. 1st July, 1906 to 30th June, 1922.	Greatest Fall in one day.		Greatest Fall in one day for sixteen Years, 1st July, 1906 to 30th June, 1922.	Mean Saturation 100.	Average for sixteen Yrs. 1st July, 1906 to 30th June, 1922.	
						Amount in Inches.	Date.				
											Inches.	Date.
1922.	...	...	...	...	...	...	...	...	...
July	...	2.43	3.75	13	14.1	0.36	23rd	2.67	82.97	85.71	
August	...	3.70	3.00	16	13.1	0.83	4th	1.90	84.13	85.69	
September	...	1.15	2.19	5	11.2	0.71	13th	1.45	81.67	81.78	
October	...	1.42	1.25	11	8.6	0.35	5th, 29th	1.10	70.93	74.92	
November	...	0.45	0.96	8	7.0	0.18	30th	0.78	65.67	73.16	
December	...	0.23	1.08	4	6.5	0.10	13th	1.61	64.68	69.84	
1923.	...	0.61	0.54	6	3.7	0.19	1st	0.90	64.93	70.86	
January	...	0.25	0.42	6	3.9	0.06	28th	0.50	69.07	73.36	
February	...	0.66	0.71	5	5.0	0.24	22nd	1.08	74.61	77.00	
March	...	2.72	1.71	14	9.3	0.83	20th	1.61	77.60	83.20	
April	...	5.06	2.76	16	12.0	0.92	13th	2.76	83.97	82.96	
May	...	4.89	3.92	15	14.3	1.19	7th	2.35	86.46	86.07	
June	...	23.57	22.29	119	108.7	1.19	7/6/1923	2.76	75.55	78.71	
Year	...	...	...	...	...	...	...	...	...	...

Table H

EARTH TEMPERATURE, 1922-1923.

Month.		Range at one foot. ° F.	Range for one foot ° F, Sixteen years, 1st July, 1906 to 30th June, 1922.	Range at two feet. ° F.	Range for two feet ° F, Sixteen years, 1st July, 1906, to 30th June, 1922.	Range at four feet. ° F.	Range for four feet ° F, Sixteen years, 1st July, 1906, to 30th June, 1922.
1922.							
July ...	...	52.2 to 57.3	49.2 to 58.1	56.0 to 57.9	54.6 to 59.8	58.0 to 59.2	57.3 to 62.5
August ...	...	53.0 to 56.2	50.9 to 59.9	55.4 to 57.2	54.5 to 59.8	57.0 to 58.8	56.8 to 59.4
September ...	...	55.3 to 56.2	50.9 to 67.2	56.2 to 59.0	55.0 to 65.5	57.5 to 59.2	57.0 to 63.0
October ...	...	59.0 to 65.3	57.2 to 75.9	59.1 to 62.8	58.0 to 72.5	59.3 to 61.7	56.8 to 66.1
November ...	...	64.0 to 67.2	61.3 to 78.0	62.5 to 65.4	61.0 to 74.9	61.4 to 64.0	60.8 to 70.3
December ...	...	66.2 to 72.2	65.6 to 79.8	65.2 to 69.1	64.2 to 77.8	64.0 to 66.8	63.8 to 81.4
1923.							
January ...	...	69.3 to 72.2	67.0 to 81.9	68.0 to 69.9	69.0 to 79.9	66.9 to 68.2	66.2 to 76.7
February ...	...	69.4 to 73.8	68.0 to 82.2	69.0 to 70.8	69.0 to 80.0	68.0 to 69.2	67.9 to 77.0
March ...	...	67.0 to 70.2	66.0 to 79.2	67.9 to 69.1	67.4 to 78.6	68.0 to 68.8	68.0 to 76.9
April ...	...	61.8 to 68.9	58.9 to 73.9	63.6 to 68.1	63.0 to 76.1	65.8 to 68.0	62.2 to 75.8
May ...	...	56.5 to 61.2	53.0 to 67.6	59.0 to 63.2	58.0 to 69.5	61.0 to 65.5	62.6 to 71.5
June ...	...	54.3 to 58.4	51.3 to 63.0	57.0 to 59.5	56.0 to 63.2	59.2 to 61.2	59.1 to 65.8
Year ...	...	52.2 to 73.8	49.2 to 82.2	55.4 to 70.8	54.5 to 80.0	57.0 to 69.2	56.8 to 81.4

